

ALCOHOLISM J. E. Doyle -

AMERICAN ASSOCIATION
FOR THE CURE OF INEBRIATES.

Proceedings of the Second Meeting,

HELD IN NEW YORK, NOVEMBER 14th & 15th, 1871.

PUBLISHED BY ORDER OF THE ASSOCIATION.

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REFERENCES TO MINUTES.

	Page.
Roll of Members—Dr. Willard Parker's Opening Remarks,	1
Treasurer's Report—Report of Committee on Legislation,	2
Business Committee and Reports,	3, 7
Resolutions on Inebriety as a Disease, the Effect of Poison, Public Crime, the Duty of Legislatures,	4
Hydrate of Chloral and Bromide of Potassium,	5
British Parliament—Hon. Donald Dalrymple—Answers to Questions,	6
Election of Officers,	7
Commission to visit England—Thanks,	8
Medical Treatment—Next Meeting—Committee on Publication—Adjournment—Note,	9

ESSAYS.

INEBRIATE ASYLUMS IN GREAT BRITAIN. Three Questions—Request for a Delegation to visit England. By HON. DONALD DALRYMPLE,	10
REPORT OF MARYLAND INEBRIATE ASYLUM—STATISTICS. By Dr. C. B. GAMBLE,	12
REPORT OF THE INEBRIATE'S HOME FOR KINGS CO., NEW YORK.—Statistics—Nationalities—Prisons—Inherited Inebriety—Barbarous Laws—State Appropriation—New Home. By REV. JOHN WILLETT, <i>Supl.</i> ,	11
THE SOCIAL SIDE OF TEMPERANCE REFORM.—Intemperance a Social Sin—Asylums the Social Remedy—Legal Prohibition. By A LATE INMATE OF THE NEW YORK STATE INEBRIATE ASYLUM,	19
INEBRIETY BY INHERITANCE. By W. C. WEX, M.D.—Desire in the Human Race—Transmitted Tendency—History of Psychology—Nature of Inebriety—Law and Science—Special Treatment—a Physical Disorder—Some persons cannot become Drunkards—Other Diseases—Deformities—Rules of Transmitted Disease—Vital Law—Male or Female Line—Statistics of Inherited Inebriety—Reformation—Inebriety and Insanity—Life Insurance Companies,	21
TEMPERANCE AND INTEMPERANCE—THE DISEASE AND ITS REMEDY. By OTIS CLAPP, Esq.—Definition of Temperance—Causes which Obstruct the Growth of Mankind—Two kinds of Drunkenness—Inebriates can be Reformed—Difficulties in the Way—Commission on Inebriate Asylums in Massachusetts—Their Report—Man, Sober and Drunk—Cost of Intemperance,	19
THE PATHOLOGY OF INEBRIETY. By GEO. BURR, M.D.—Inebriety a Disease—Dr. Rush—Esquirol—Dr. Robert Jamison—Dr. Woodward—Dr. Ray—Propensity to Drink a Morbid Condition—Why do Men Drink—Morbid Sensation—Prof. Reid—Sense of Taste—Examples of Diseased Tastes and Appetites—Differences of Constitutions—Appetite in Man for Stimulants—Classes of Inebriates—Complete Intoxication—Transmitted Tendency—Law of Development—Period of Life—Emotional Excitement—Tippling—Previous Susceptibility—Effects on Character—Duty of Medical Profession,	48
THE CLASSIFICATION AND TREATMENT OF INEBRIATES. By JOSEPH PARRISH, M.D.—CONFIRMED INEBRIATES—A Considerable Class—Custody and Restraint—Body Poisoned—Moral Development Retarded—Duty of State—Deals with them as Criminals—No Practical Service—English Statistics—Detention in Asylum. EMOTIONAL INEBRIATES.—Nervous System—Will Powerless—Inefficiency of Law—Hysteria. ACCIDENTAL INEBRIATES.—Eating and Drinking—Immorality of Excess—Comparison—Notes of Two Hundred Cases—Insane—Dr. Kirkbride. INSTITUTIONS.—Prejudice—Compared with Insane—Increase of Insanity—Per Centage of Incurables—Curability of different Classes—Objections—An Institution a Miniature Community—Crime and Intemperance—Society owes much to Inebriate—Punishment to be Displaced,	61
WHAT SCIENCE AND THE INEBRIATE ASYLUMS HAVE TAUGHT US. By WILLARD PARKER, M.D.—Insanity—Pinel—Asylums for Inebriates—Nature of Alcohol—Influence of Alcohol—A Poison—In Certain Cases Useful—Three Classes of Poisons—Inebriate in Abnormal Condition—Effects of Alcohol beyond the point where it is useful—Spirit Drinker falls to Cope with Temperate man—Statistics of Life Insurance—Epidemics—Offspring—Idiots—Inebriate Asylum a School—Sin of Over-eater and Over-worker—Statistics of Temperament, from New York State Inebriate Asylum,	70
EXPERIENCES OF WASHINGTONIAN HOME AT BOSTON. By W. C. LAWRENCE, <i>Supl.</i> —The World Flooded with Statistics—Mission of Asylum—Differences in Inebriates—Who should be Received—Reformation and Restraint—Experience with different Classes—Medicines—Disease of the Mind—Those who Reform—Means Employed—The Man himself,	82
HYDRATE OF CHLORAL IN DELIRIUM TREMENS. By Dr. J. A. Fallette, M.D.—Seven Cases,	90
STATE (OR PUBLIC) INEBRIATE ASYLUMS—THEIR SUPERIORITY OVER SMALLER (OR PRIVATE) INSTITUTIONS. By D. G. DODGE, M.D.—Usefulness of Asylums—Acknowledged—Two Classes—Which Advisable—Economy of Large Institutions—Hotel Keeping—Rent—Attendants—Light—Fuel—Food—Cure—Influence of Masses—Disch. line—Classification—Library—Chaplain—Theatre—Restaurant—Law,	93
BRIEF HISTORICAL SKETCH OF THE CHICAGO WASHINGTONIAN HOME, WITH SOME GENERAL REMARKS. By T. M. VANCOURT, <i>Supl.</i> —Organization—Incorporated—Law of Kindness—Stimulants in Infancy—Domestic Wines—Alcoholic Medicines—Prayer Meetings—Occupation—Lectures—Female Inebriates—Statistics—Results—Kleptomania—Laws of Illinois—Treatment in Asylums—Social Element—Delirium Tremens,	103
ADVERTISEMENTS,	107, 118, 119, 120

MINUTES.

THE second meeting of the American Association for the Cure of Inebriates assembled November 14, 1871, at the Young Men's Christian Association Rooms, New York, and organized about 12 o'clock noon, Dr. Willard Parker, President, in the chair.

The following members were registered:

WILLARD PARKER, M.D., President of the New York State Inebriate Asylum.

T. L. MASON, M.D., Consulting Physician, L. D. MASON, M.D., Attending Physician, CAPT. ED. RICHARDSON, Trustee, REV. JOHN WILLETT, Superintendent of King's County Inebriates Home, N. Y.

CARY B. GAMBLE, M.D., Superintendent of Maryland Inebriate Asylum, Baltimore.

OTIS CLAPP, President, W. C. LAWRENCE, Superintendent of Washingtonian Home, Boston.

GEO. BURR, M.D., Binghampton, W. C. WEX, M.D., Elmira, N. Y., Trustees, D. G. DODGE, M.D., Superintendent of New York State Inebriate Asylum.

STEPHEN ROGERS, M.D., President of Medico-Legal Society of New York.

JOSEPH PARRISH, M.D., President of Pennsylvania Sanitarium, Media, Pa.

On calling the meeting to order, Dr. Willard Parker congratulated the delegates upon the establishment of the association on a permanent basis. To him, the subject of the reclamation of the inebriate was the great subject of the day.

It was one deserving of profound attention and effort. The result of his observations, he said, was that it was one that ought to come under the notice of the medical profession, and secure their earnest support. Inebriety, he felt, was as much a disease as scarlatina or small-pox. He believed it to be the duty of the association first, to look well to the status of the inebriate; second, to consider what can be done in order to remove or palliate this, the mightiest of all evils God ever tolerated upon the earth. Yellow fever was harmless compared with inebriety. Thirty-three and a third per cent. of all deaths in this city were the direct, or indirect result of the use of alcohol, and in the last thirty-eight years 190,000 persons in this city had died from its use, either by its direct influence or through neglect or disease of parents.

He urged upon the meeting the necessity for earnest and patient investigation of the subject, and believed that the institutions for inebriates in this country had accomplished great good already, and that much more would yet be done.

The order of business was then called for, and the Treasurer made the following report:

T. L. MASON, *Treasurer, in account with The American Association for the Cure of Inebriates, Brooklyn, November 14, 1871.*

Dr. To cash received from	
Washingtonian Home, Boston, Mass.	\$100 00
Washingtonian Home, Chicago, Illinois	100 00
State Inebriate Asylum, Binghampton, N. Y.	100 00
Willard Parker, M.D., N. Y.	37 50
Inebriates' Home for Kings County, N. Y.	100 00
Dr. Day, Massachusetts	50 00
Maryland Inebriate Asylum, Baltimore	62 50
Pennsylvania Sanitarium, Media, Pa.	75 00
Total Debits	\$625 00

Cr. By amount paid Henry B. Ashmead for 5000 "Proceedings," as per bill and receipt, January 31, 1871 \$625 00

which was approved and accepted.

The Committee on Legislation made report through Dr. T. L. Mason, that they had accumulated some facts and laws, but

circumstances had prevented their preparing a satisfactory bill, which report was accepted and the committee continued.

A communication was received from the Hon. Donald Dalrymple, member of the English Parliament, and Chairman of the Committee of the House of Commons to whom was referred a bill entitled the "Habitual Drunkards' Act," which was read, and on motion of Otis Clapp, Esq., of Boston, was laid on the table for the present.

A communication was also read from Dr. Elisha Harris, of New York, on the "Criminality of Intemperance," which was also read, and laid upon the table till a committee should be appointed to which such business could be referred.

On motion of Dr. W. C. Wey, a business committee of three was appointed, to receive resolutions and communications, and prepare business. The chair appointed the Business Committee as follows: W. C. Wey, M.D., Otis Clapp, Esq., and T. L. Mason, M.D.

A recess was taken for a few minutes for the purpose of allowing the Business Committee to prepare business, when the following report was made:

The Committee on Business, to which was referred the papers to be presented to the second meeting of the American Association for the Cure of Inebriates, report that the following be read in the order in which they are presented:

1. Report of the Maryland Inebriate Asylum. By Dr. Gamble.

2. Report of the Superintendent of the Inebriates' Home for Kings County, N. Y. By Rev. John Willett.

3. The Social Side of Temperance Reform. By a former Patient at the New York State Inebriate Asylum, Binghampton.

4. Inebriety by Inheritance. By W. C. Wey, M.D., Trustee of New York State Inebriate Asylum.

5. Temperance and Intemperance; the disease and its remedy. By Otis Clapp, President of Washingtonian Home, Boston.

6. On the Pathology of Inebriety. By Geo. Burr, M.D., Binghampton, Trustee of New York State Inebriate Asylum.

7. Classification of Inebriates. By Joseph Parrish, M.D., Superintendent of Sanitarium, Media, Pa.

8. What Inebriate Asylums have done. By Dr. Willard Parker.

9. Experience at the Washingtonian Home. By Wm. C. Lawrence, Boston.

10. State or Public Inebriate Asylums; their superiority over smaller or private institutions. By Dr. D. G. Dodge, Superintendent of New York State Inebriate Asylum, Binghamton.

The report was accepted, and after reading the communications from Drs. Dalrymple and Harris, the papers were read in order from the first to the seventh inclusive, and at 4 o'clock the Association adjourned, to hold a conversational meeting at the residence of the President, to commence at 8 o'clock this evening; the Association to organize again to-morrow morning at 9 o'clock, in this place.

EVENING.

An informal meeting was held in the evening at the residence of Dr. Parker, from 8 o'clock to 11.30, during which important questions, especially touching the discipline of institutions, and the criminality of intemperance, were profitably considered.

WEDNESDAY, A. M.

At about 9 o'clock, the Association was called to order by the President, and the Business Committee offered the following resolutions, which were carefully considered and unanimously adopted.

Whereas, It is the practice of many persons to denounce inebriety as a crime, and inebriates as sinners, and

Whereas, Such persons are reluctant to admit the fact that inebriety is a disease, lest such admission should seem to palliate the offence, and relieve the inebriate of responsibility, therefore,

Resolved—as the expression of this association—That we are dealing with inebriety as a disease, without reference to the motive, or want of motive, in the inebriate himself.

Resolved, That the effect of poison on the blood and nervous system, and the reflex action of this morbid agent upon the whole physical structure, is the same in the virtuous, as in the vicious, and that antecedent or subsequent moral conditions are incidental to the main fact of disease.

Resolved, That any given per centage of public crime being accounted for by the fact of the confirmed inebriety of the criminal, does not, in our opinion, increase the responsibility, nor should it add to the punishment of such offenders.

Resolved, That we have no controversy with the dogma of criminality as applied to the act of drunkenness, while we do not charge the inebriate with being a criminal.

Whereas, Intemperance is a fearful drain upon the productive interests of the community, which is increasing in magnitude every year, and

Whereas, The measures hitherto adopted to suppress or even curtail this evil have been unavailing, therefore,

Resolved, That in the opinion of this Association it is the duty of legislatures, as a measure of state economy, to provide means for the erection and encouragement of hospitals, for the detention and treatment of confirmed inebriates.

Vice-President, Otis Clapp, Esq., was called to the chair, and the remaining papers were read in order.

Dr. Lewis D. Mason spoke of the use of hydrate of chloral in combination with bromide of potassium in delirium tremens. His attention had been called to the combination of the two remedies by the fact that Dr. Gray, of the State Lunatic Asylum at Utica, had used it with great satisfaction in the treatment of certain cases of insanity; since which Dr. Mason had used it with much success in the Kings County Home. He had also directed the use of large draughts of strong ale in such cases with great effect. The Kings County Home furnished opportunity for considerable experience with this disease, and having found these remedies very efficient, he took pleasure in reporting them.

The Business Committee presented the following, which were unanimously adopted :

Whereas, The British Parliament having appointed a committee on a bill relating to Habitual Drunkards, which committee is intrusted with the question of establishing asylums for inebriates, and

Whereas, The Hon. Donald Dalrymple, member of Parliament, author of the Bill, and Chairman of the Committee, to whom it was referred, having recently visited this country, for the purpose of examining and reporting upon our institutions, it is

Resolved, That those among us who have had the pleasure of meeting the Hon. Mr. Dalrymple have been impressed with the increasing importance of the subject we have in hand, from his representations of the favorable public sentiment relating thereto in Great Britain, and desire to express thanks to our distinguished visitor for his interest and work in this branch of scientific philanthropy, and our sincere regret, that illness in his family hastened his departure from our country, and thus prevented his attendance at this meeting.

Resolved, That in answer to the request made in his communication for a delegation from this body to visit England, for the purpose of conferring with the Committee of Parliament on the subject of establishing institutions for the cure of inebriates in Great Britain, we deem it proper to approve of such appointment.

The Committee also presented the following answers to the questions of Dr. Dalrymple, and on motion of Dr. T. L. Mason they were considered separately, and each in connection with the question to which it refers, as follows :*

Question 1. "Is it desirable to give legal power to detain those who have entered an inebriate institution longer than they are willing to stay *sua sponte*?"

Resolved, That it is desirable to give legal power to institutions for inebriates to retain their patients, until in the judgment of the proper officers of these establishments, such patients are restored to health.

* See page 10.

Question 2. "Whether it is desirable that those who enter an institution voluntarily, or by the advice and persuasion of relatives and friends, should be placed in the same institution as those who are sent there by legal enactment or judicial authority?"

Resolved, That it is desirable that patients who enter such institutions voluntarily, or by the advice or persuasion of friends, should be treated in the same manner as those who are admitted by legal enactment or judicial authority.

Question 3. "Whether inebriates should ever be admitted into a lunatic asylum, or hospital properly so called, or, if admitted while in a maniacal condition should be allowed to remain when that stage is over?"

Resolved, That inebriates should not be received into lunatic asylums for treatment, but if admitted temporarily in a state of mania, they should be immediately discharged after this condition has subsided, and removed to an inebriate asylum.

The Business Committee presented the following, and their recommendation was on motion agreed to.

The Committee on Business recommend that in the future sessions of this Association, the first act of the President, on taking the chair and ordering the roll of members to be called, shall be the appointment of a Committee on Business, to be composed of three members, to whom shall be referred all reports, communications, and written papers, with power to arrange and propose the same in proper order to be presented to the Association.

On motion of Dr. T. L. Mason the Association proceeded to ballot for officers for the ensuing year. The Chair appointed Dr. L. D. Mason teller, and the following was the result of the election :

For President,	Joseph Parrish, M.D., of Pennsylvania.
For Vice-Presidents,	{ C. J. Hull, Esq., of Illinois.
	{ Otis Clapp, Esq., of Massachusetts.
For Secretary,	D. G. Dodge, M.D. of New York.
For Treasurer,	T. L. Mason, M.D., of New York.

On motion, Dr. Parker, President, was requested to name the commission to visit England, in compliance with the request of the Committee of the House of Commons, through the Hon. Donald Dalrymple, Chairman of said Committee; whereupon the following were appointed and approved by the Association, Joseph Parrish, M.D., and D. G. Dodge, M.D.

The Business Committee reported the following, which were adopted.

Resolved, That the thanks of this organization be communicated to the officers of the Young Men's Christian Association of this city, for the courteous use of their parlor during the sessions of the Association.

Resolved, That this Association hereby expresses to Willard Parker, M.D., its retiring president, its appreciation of his urbanity and great ability as a presiding officer, and its estimate of his prominent, persistent, and successful connection for so many years with the subject of inebriety, by which he has had the satisfaction, which has been shared and applauded by all philanthropic men, of witnessing a more intelligent and enlightened recognition of the true scientific worth and efficiency of the cure of inebriety.

Rev. John Willitts rose to offer a resolution which he said was not presented to the Business Committee for want of time. He did not think it necessary to offer it till it had been said by one of the authors of an essay, during this session, that medical treatment was not considered important in the treatment of inebriates in asylums or homes. He was not a physician, and yet he was superintendent of an institution, where he daily witnessed the necessity for, and the value of medical advice. He professed to be a nurse, and believed in good nursing for this class of persons, but the test of good nursing was, in his opinion, obedience to the instructions of good physicians, and he attributed the success which had attended his superintendence of the Kings County Home to the faithful medical service of the consulting and attending physicians of that institution.

He offered the following resolution, which was adopted:

Resolved, That this association regards inebriety as a physical disease, which, in the great majority of cases, can only be combatted by medical treatment, and that inebriate institutions are beneficial, inasmuch as they afford the means of hospital treatment and necessary restraint.

Dr. L. D. Mason wished to say in this connection that he had no disposition to criticize any well meant efforts to do good to the inebriate by any method; but he held in his hand the report for the last year of the institution, where medical treatment was not considered necessary, and he found that the average number of patients in that institution was less than one half the average number treated in the Kings County Home, where there are two physicians, and the bill for medicines in the former was nearly double the amount paid in the latter institution.

On motion of Dr. W. C. Wey the plan of organization was so altered as to admit the holding of the next meeting on the second Tuesday of October instead of November.

It was also ordered, that the proceedings be referred to the officers of the association for publication, and that five thousand copies be printed, to be divided, as was done last year, between the different institutions who should share in the expense of publication, according to the amount contributed, and that the usual quota for Chicago be sent without charge, to the Washingtonian Home of that city. Adjourned to meet at 12 o'clock noon, in New York City, on the second Tuesday of October, 1872.

JOSEPH PARRISH,
Secretary.

The Association holds itself responsible only for the opinions expressed by vote, as recorded in the minutes. It has taken no official action on the essays, other than to order their publication as part of the proceedings of their meeting.

ESSAYS.

COMMUNICATION FROM HON. DONALD DALRYMPLE, MEMBER OF PARLIAMENT, ENGLAND.

MR. PRESIDENT:—It is with a regret that words will ill express, that I find myself obliged to take this method of conveying to the assembled gentlemen the few remarks on the position of the Reformation of Inebriates in Great Britain, which I had hoped and intended to have delivered *viva voce*. The urgent nature of my private affairs calls me home, and I am reluctantly compelled to relinquish the pleasure and the advantage I had promised myself in meeting many of those whose courtesy and hospitality have done so much for my personal comfort, and whose accurate knowledge and scientific attainments have conveyed to me such abundant and valuable information.

The actual position of Inebriate Asylums or Reformatories in Great Britain, may be best described as “non-existent.”

Not one of the several attempts made to establish such institutions, can be quoted as doing or having done any good or effectual service. One there is for women near or in Edinburgh. Another under the care of Dr. Manning, the Catholic Archbishop of Westminster, also for women, exists, but they cannot be said to succeed, and the reason assigned is, that want of power to cause persons to remain long enough in them, to which I shall have to refer presently.

The practice of placing an inebriate away from home, with a private attendant, or in the house and under the charge of a medical man, is not uncommon with us; but it should be re-

garded as an evidence rather of the urgent need of some definite and well-organized system, than of successful action.

The custom, alike mischievous and illegal, of keeping inebriates in ordinary lunatic asylums after they have recovered from the immediate mania which alone rendered it possible to place them there, is every now and then adopted, but the risk of doing so is known to be great, and the supervising authorities are strongly opposed to it.

Such may be fairly taken as the existing state of things with us. No public recognised institution for the care and management of inebriates exists, while the private efforts are few, desultory and ineffective.

The want of such institutions as exist on this side of the Atlantic, is very generally felt. The medical profession are much in favor of their creation, and a very large amount of sympathy with and assistance to the movement has been manifested by the general public, and in evidence I beg to refer to the enclosed report and those passages which I have underlined.

To meet this want, a bill has been prepared to legalize the establishment of such institutions, has been introduced into the House of Commons, and has been referred to a select committee. A copy of the bill herewith.

Such is the present state of affairs, and the visit I have so abruptly to terminate was made for the purpose of ascertaining how far the machinery of the existing institutions of this country could be made available, and what modifications, if any, are needed.

I have learned much, and I hope from the kindness of those connected with this Association to learn yet more, by being furnished with your opinions and views on the various points which will be discussed at your meeting.

I have asked for and obtained the promise of a statistical return from every place at which I have visited, so far at least as their records will enable them to give them.

There are three points on which, had I been present, I should have asked for an expression of opinion, and I now ask the meeting to be good enough to make their views known to me in such a way as may be deemed most suitable:

1st. Is it desirable to give legal power to detain those who have entered an inebriate institution, longer than they are willing to stay *sua sponte* ?*

2d. Whether it is desirable that those who enter an institution voluntarily, or by the advice and persuasion of relatives and friends, should be placed in the same place as those who are sent there by legal enactment or judicial authority?

3d. Whether inebriates should ever be admitted into a lunatic asylum or hospital properly so called, or if admitted while in a maniacal condition, should be allowed to remain when that stage is over?

Lastly, I have this request to make, which I desire to urge with my utmost power, viz.: that a delegation of at least two of the most competent and best informed of those who are conversant with these institutions, should come to England and give their evidence before the Committee of the House of Commons that will meet early in the session of next year.

That such an act would be of the greatest service to the cause we all seek to promote, no one can doubt; nor that it would advance that cause in England as much as anything else; that it would show to an English House of Commons, how deeply those American gentlemen who have embraced this great but difficult question, have laid it to heart; and it would prove to them in turn the high appreciation of such testimony from such sources, as well by the legislature as by the people of England.

I can hardly imagine anything outside the debateable land of politics, which would more tend to promote harmony and union among earnest, thinking men of both nations, than such a proceeding.

In conclusion, sir, permit me to tender to those whom I have the pleasure to know, my cordial thanks for all their kindness to me, and to bespeak as well from them as from those to whom I am unknown, for the cause I advocate, and for the advocate himself, a continuance of these good offices.

DONALD DALRYMPLE.

* See Resolutions, p. 6.

REPORT OF MARYLAND INEBRIATE ASYLUM.

BY CARY GAMBLE, M.D., SUPERINTENDENT.

After a delay of several years this home was opened in May last. It owes its establishment entirely to the benevolence of individuals, consequently is of limited capacity. A comfortable and beautiful residence is provided, with such employment and amusement as can be had. Should the undertaking prove successful, additional aid, no doubt, can be obtained to enlarge the establishment. Thus far forty patients have been received. Much the larger number only remained until restored to health. A few have undoubtedly derived great benefit from the treatment received, and hold out strong hopes of permanent reformation. This is too important a subject for hastily formed opinions to be expressed. Upon the happy solution of this problem depends the fate of many who otherwise may be lost. The conclusion arrived at is briefly, that inebriate asylums, properly conducted, can be made the means of accomplishing much good, whether the cure be permanent or not. Enough has been proved to encourage renewed efforts on a more extended scale. I add a table of the patients, and the results as experienced:

Institution has been open four months.

Number of admissions,	40 males.
Admitted once,	34 "
" twice,	3 "
" thrice,	3 "

Average time between readmissions, 1 month.

Admitted voluntarily,	8 males.
" by friends,	25 "
" by order of court,	7 "

Average time in institution, 1 month.

Benefitted,	35 males.
Incurable,	5 "

The patients have been under treatment too short a time to

be pronounced cured. Some have refrained for several months. The incurable are those who give no indication of reformation, and are only kept from relapse by restraint. In this State, on application of friends and trial by jury, a confirmed inebriate may be confined in this institution for six months, and during that period can be controlled by authority.

REPORT OF THE SUPERINTENDENT OF THE INEBRIATES' HOME FOR KINGS COUNTY, FOR THE YEAR ENDING OCTOBER 31, 1871.

During the past year 149 cases received medical treatment and sustenance in our Home.

Of this number, 18 patients remained over from the preceding year, leaving 131 admissions for the past year, inclusive of 18 readmissions, and 18 persons so readmitted; or equal to 131 persons treated during the year.

The whole number of patients treated in the institution since the opening on October 10, 1867, is 675.

Of the number treated last year, 25 are known to be sober at the present time, and, we trust, reformed; 29 are much improved, and more or less hopeful; 33 are lost sight of, and no conjecture can be offered as to their probable condition; 43 still continue to indulge the diseased appetite for strong drink, and one aged female, who for many years had been a habitual drunkard, after a residence with us for seven months, and practicing total abstinence during that period from the use of intoxicating liquors, died in the institution, a sober woman, and we believe, a true Christian.

NATIVITY OF PATIENTS.—Ireland 62, United States 52, England 19, Scotland 7, British Provinces 4, Germany 1, elsewhere 4.

SEXES.—Males 83, females 66. Total 149.

SOCIAL CONDITION.—*Males*, married 45, widowers 8, single 31; total 84. *Females*, married 27, widows 29, single 9; total 65.

Of 72 married men and women whose partners are still living, 45 have been separated from wives and husbands through intemperance and consequent imprisonment.

Of 37 widowers and widows, 23 were so separated before the deaths of their respective partners, from the same cause; thus, there were 68 separations out of the total of 109 married persons, or nearly two-thirds of the whole number.

Transferred from our prisons,	43
Voluntary patients,	121
Involuntary,	28
Boarders paying more or less,	43
Free,	106
Habitual drunkards,	80
Periodical "	69

Of this number there were—

Whiskey drinkers,	115
Drinkers of other ardent spirits,	34
Had delirium tremens,	26
Hereditary drinkers,	47
Other known to be assumed causes,	102
Used opium,	3
" other narcotics,	9

Average time of patients in institution, after deducting those who have come and gone within 14 days, and who evinced no desire to reform, 73 days.

It will be observed that all our patients have imbibed ardent spirits; and further, those nationalities where alcohol is freely indulged are the most fully represented in our returns. Several who are returned as Americans, are the offspring of foreign parents.

As heretofore, the Germans are most conspicuous by their absence from our institution. While their national beverages, which consist of fermented liquors, may, and doubtless do, render those who drink to excess stupidly intoxicated, we have never yet met with or heard of a single case which has terminated in delirium tremens.

Further, while the pathway from the excessive use of fer-

mented liquors to sobriety (which means total abstinence) is comparatively easy, and the beer, ale, or light wine drinker never loses his will power and responsibility, those who have either inherited or acquired an appetite for alcohol, find a rough and thorny road to travel in their struggles for reformation.

Alcohol, though useful as a medicine, when drunk as a beverage is doubtless a poison, and when the taint has once spread itself throughout the system, it is, of all other poisons, the most difficult to eradicate. Even though the inebriate might possibly, by dint of a strong will or superior moral culture, be enabled to retrace his steps and abstain, he has nevertheless, in all probability, handed down to his children or his children's children a taint in the blood which will prove a blight and a curse to future generations.

As we pass through our prisons, and gaze upon hundreds of human beings incarcerated in dungeons on the charge of drunkenness, and who have perhaps been committed from one to one hundred times, we find, on examination, that the hereditary taint is everywhere present, and that many of these poor wretches drink ardent spirits, because their forefathers did so before they were born into the world.

In the physical world there is no forgiveness of sins; but surely it ought to suffice when we witness the melancholy spectacle of the vices of the parents being visited upon the children, without adding to the punishment which the natural laws so severely inflict, the degradation and wretchedness of a felon's cell, and the slow, but certain process of starvation, which is involved in being limited to prison diet.

Imprisonment for drunkenness is a reproach to our civilization. We break down the great landmarks which ever ought to distinguish between high crime and venial offences. In our jails and penitentiaries, young inebriates are huddled together with hardened villains and cut-throats. The sensitive young female, whose dire misfortune it is to inherit an uncontrollable thirst for strong drink, together with impaired physical and will powers, coupled with defective moral and religious training, finds herself thrust face to face with the shameless prostitute.

The young wife, and the old hag, are compelled to associate together, and exchange thoughts with each other.

Our jails and prisons are too often high schools for crime, where our young inebriates are trained into all the arts and mysteries of the sneak-thief and burglar. "Fool, why don't you steal?" That and kindred questions are frequently put to the young man who finds himself thrust into a felon's prison, because he has not been able to walk steadily along the streets, or has not been prepared to bribe the policeman.

An experience of many years enables us to speak that we do know, and bear testimony to that which we have seen in our visitation of prisons. It is a lamentable and humiliating fact, which ought to be published upon the housetop, and heralded throughout the length and breadth of the land with a trumpet-voice, that, at the public cost, our authorities are inadvertently educating, drilling, and training our inebriate population to recruit the grand army of thieves, burglars, and highwaymen who are engaged in perpetual warfare against society. There they are taught to believe that the community owes them a living, and that they have the right, with violent hands and daring effrontery, to rob, and if needs be, to murder their plundered victims.

The constitutional inebriate inherits a perverted and enfeebled will and impaired moral nature, and he therefore becomes an easy prey to the alluring enticements of the hardened and accomplished villain. To him there is not unfrequently a strange and bewildering fascination in the wondrous stories of the romance of crime, which are repeated in his ears. When once induced to join the army of thieves, he is thrust into the front rank in all daring operations, while the master robber stands in the back-ground to direct and control his movements. If the police happen to make an arrest, the chances are a thousand to one against this poor tool and in favor of the escape of the master spirit. It is this unfortunate class, which as a rule are thrust into our state prisons and penitentiaries, while our accomplished thieves are, for the greater part, left at large in our cities, and allowed to run riot in the midst of society.

From every consideration, commencing with the lowest and most selfish, and rising to the highest and most benevolent motives, we appeal to all good and earnest men to come to the rescue of this cruelly wronged, degraded, and down-trodden class of our fellow-citizens.

Though we may not be able to purge out entirely the taint in the blood, and to eradicate the malformation of the impaired physical and moral nature of the hereditary inebriate, we can, nevertheless, by proper medical treatment and kind restraints, relieve, if not cure his malady, and in the meantime prevent his excesses, and place him in a position to contribute to the general welfare of the community. Degraded and down-trodden though he may be, he is nevertheless our fellow-man and brother, purchased by the precious blood of Christ, and possessing an inner spirit which is destined to survive the wreck of time and to run parallel with the countless ages of eternity.

The repeal of those barbarous laws which consign the inebriate to the felon's dungeon, should at once be demanded, and humane enactments, providing for the cure, and at the same time, in return, securing to his family or to the community the services which he can render, should be adopted and carried into execution. Every dollar thus expended will yield one hundred fold to the community in the prevention of pauperism as well as crime.

Our returns show, that out of the 72 married men and women who have been inmates of the house during the past year, 45 are separated husbands from wives, and wives from husbands, and out of 37 widowers and widows, 23 were so separated before the death of their respective partners. In the great majority of cases, the committing magistrate might just as well add to his sentence of imprisonment a decree of divorce from the husband or wife, for the latter is generally involved in the former, and thus our pauper as well as criminal institutions are crowded with deserted wives and children.

Referring again to our "Home," we are happy to state that the control of the money granted nearly four years ago by the State Legislature, for the purpose of erecting suitable buildings

for our work, has, after long delay, been taken out of the hands of those who had no sympathy with the objects of our institution, and a noble house is now in process of erection at Fort Hamilton, specially designed for the entire separation of the sexes and the classification of the patients.

The occupants of the several floors will constitute so many separate communities, of kindred tastes, sympathies and culture. The apartments for boarder patients will be fitted up with every modern convenience which shall conduce to the comfort of the inmates.

The sea and land, river and bay views from the several windows, are unsurpassed through this whole country.

The park and garden grounds will be on a large scale, boldly and tastefully laid out and decorated.

Peculiar adaptation to the necessities, convenience and recreation of the patients, is constantly kept in view throughout the entire arrangement of the house and grounds.

Should the weather continue favorable for building operations, we hope to be able to occupy our new Home early in the coming spring, and place ourselves in a position for extended usefulness to all classes of inebriates.

J. WILLETT, *Superintendent.*

THE SOCIAL SIDE OF TEMPERANCE REFORM.

BY A LATE INMATE OF THE NEW YORK STATE INEBRIATE ASYLUM.

It may be set down as an axiom, that intemperance is a social sin. Men rarely go apart by themselves to drink, and men take their first lesson as tipplers in solitude. We are imitative creatures, and draw our lessons of indulgence, as well as of industry, from the example of others. A boy is quick to mark the delight with which his father smacks his lips over a glass of rare old wine. As he grows up he learns from others laughable and enticing stories of the pleasures of intoxication. He is taught that it is manly to drink strong liquor without

winking, and that he is a milksop who has not been "tight" a few times. At dinner parties, receptions, clubs and social gatherings of all kinds the same lesson is impressed upon him, and he thinks himself no worse than others if he is occasionally carried home in a state of helplessness. If he goes on from bad to worse and becomes a drunkard, society is morally responsible for his fall. Society, therefore, should do what it can for his recovery.

It is true, that there has been a decided change for the better in regard to our social drinking customs. The bottle is no longer kept in prominence on the minister's sideboard, as was customary thirty years ago, and thousands of our clergy preach and practice total abstinence. It is no longer deemed obligatory to provide strong drink at christenings and funerals. It has been discovered that it is possible to have a wedding reception without the presence of liquor, and the consequent concomitant of drunken guests. Some ladies have been bold enough to set their tables on New Year's day with no stronger liquid refreshment than tea and coffee. And last of all and best of all, in my humble opinion, there exists in this land an organized army of temperance men, who are determined to prohibit by law the sale of strong drink, except as a medicine—or poison.

Since intemperance is thus clearly a social sin, it seems to me, that its cure is best sought by social means. It would be found impossible, I am convinced, to take each inebriate separately and work his cure. The attempt, if made, would prove a failure. The patient would only brood over his sin and sufferings, grow morbidly conscious that the whole world despised him, fret and despond under restraint, and return to his evil habits, in order to seek relief from oppressive thoughts as soon as the period of his probation or imprisonment was over. For this reason the old methods of sending a young man on a voyage to China, of rustivating him in a retired farm house, and other varied contrivances for freeing him from temptation by shutting him up with only his thoughts for companions, have proved to be failures. These plans all lacked the social ele-

ment, and could not be successful without it. Man is so constituted that he needs companionship in all he does. It is one of the oldest axioms of revelation that "it is not good for man to be alone." As an upright and pure citizen he needs the support of those who will work with him in things "lovely and of good report." Much more as a wavering, weak inebriate does he need the countenance and sustaining example of those who are endeavoring to accomplish for themselves the task that he has undertaken.

To my mind (and I speak from experience, and not as a theorist) this is one of the strongest arguments in favor of the establishment and hearty support of asylums for the cure of inebriates. I hold society responsible for the fall of most of those who are drunkards, and therefore bound to do all that it can for their restoration. Until lately, it has been content to tempt young men to the indulgence or creation of an appetite for intoxicating liquors. When it had succeeded in arousing the thirst for liquor it turned its back upon the maddened inebriate as an outcast; throwing him into prison when his body became helpless, or burying him in the potter's field when the natural result of ruin and death were accomplished. Let us be thankful that we have reached a day when the people begin to see the error of their ways, and are learning to take part of the drunkard's sin on their own shoulders. This feeling of responsibility is sufficient to arouse and quicken the public mind in the matter of saving and reforming the inebriate. But when in addition it becomes evident that this reformation has a social side, the best way in which the public can work for this end is made apparent. To be successful, the cure must be sought by means of asylums, where a number of patients are gathered together.

Take the subject in its practical bearings. After a long course of indulgence in drink a man finds that his will power is almost destroyed. He has made solemn promises, and broken them; has signed pledges, and violated them before the ink was scarcely dry; has tried change of location, and found the experiment unavailing. A friend advises him to go to an ine-

briate asylum. He hesitates, from natural shame of exhibiting himself in such a character; but at last consents. On his journey he fancies himself scorned and despised when he arrives at his destination, or given over to the companionship of the wrecks and dregs of humanity. But how is it in fact? As he enters his new home he finds himself greeted by intelligent, refined and robust gentlemen, gathered from all the walks of life. They are swift to make him realize that they all stand on the same footing, and that there is no one in the asylum who has the right to hold him in contempt. One after another details his experience as they become acquainted, and all tell him of what they are doing for themselves and for one another. As soon as he is in a state to realize this fact he is a new man. His moral sensibilities are awakened, and he begins to realize that there is hope for him in the future. What others are doing and have done he, also, can do for himself. Here are men, some of them the first in the land, who will never despise him, and he begins to believe that there may be others in the world whose heart will be as kind. Henceforward, for him, there is no such word as fail. Brooding thoughts are exchanged for healthy companionship, and doubts and fears for high resolves. As the result of this social influence the work of reformation grows easier every day. From one and another he hears the story of those who have gone forth from the institution and taken their places again in the busy world. They fill high positions in the professions, and places of trust in business circles, and are living proofs of what can be done for the inebriate. When his own will has become strong enough to be trusted he goes out into the battle with his eye on those whose story he knows, and who know his story, assured of their support and respect in the struggle that is to follow. This source of strength will always be with him, and it will grow and spread until society at large will become eager to grasp the reformed inebriate by the hand and restore him at once to his forfeited place as having earned it by right of a hard battle crowned with victory.

It will be seen, from the tenor of these remarks, that I am

strongly in favor of institutions which have a large number of patients. The social effect is better. From a multitude of companions each person can choose those who are best suited to his habits and modes of thought. Besides, the presence of numbers increases self-confidence. It implies a practical belief in reformation, and a determination to shake off the bondage of vice. The presence of a dozen patients would appear merely experimental; the presence of a hundred has the appearance of settled convictions. Again, I speak from experience, recalling the good effect of the companionship of ninety inebriates, representing all sections and all classes, in my own case. They appealed at once to the social side of my nature, making me realize that there was yet a place that I might fill, and work for me to do. Their presence strengthened and upheld me in the dark hours of doubt that *will* come to all who are warring against an enemy within themselves. Without their help the will would have to war alone against a foe whose wiles are legion.

Thus I have given briefly a few practical reasons why our asylums for the cure of inebriates deserve the support of society—of the public at large. They need no more commendation to the fostering care of the State. If a single drunkard has been saved from death (and many have been rescued) the money expended in this direction has been well spent. If there is a possibility of saving others the State is bound in justice to exercise this measure of care for its citizens. The united action of society and the State would do much to alleviate, if not to check, the ruin wrought by the licensed rumseller.

Suffer me to add yet another word. There is one social side of temperance reform to which allusion only has been made—that of legal prohibition. It is clear, to my mind, that this is the ultimate and only remedy for the evils of intemperance. The asylums which have been established are practical proofs of the correctness of this position. Local prohibition prevails within their limits. Extend their boundaries by city, town, and state, and you shut up every grog shop in the land. It is vain to evade this statement of a single fact. It were far

better did the friends of the inebriate boldly take this stand and avow their asylums to be the outposts and strong fortresses of the army that is sworn to sweep the cause of intemperance out of existence. Logically they can reach no other conclusion. As members of society they must see that prohibition is a grand social movement (which, like all other steps towards the light, must involve sacrifice), for the rescue of men too much exposed to temptation. As officers or supporters of inebriate asylums it is evident that their work carries in itself the essence of prohibition. As men they come down to the simple question of the comparative value of a glass of wine and a human soul.

INEBRIETY BY INHERITANCE.

BY WILLIAM C. WEY, M.D., ELMIRA, NEW YORK, PRESIDENT OF NEW YORK STATE MEDICAL SOCIETY, AND TRUSTEE OF NEW YORK STATE INEBRIATE ASYLUM.

All nations have learned the secret of extracting from vegetable sources some substance like Indian hemp, opium, or alcohol, which produces exhilarating, narcotic or intoxicating properties. From the earliest recorded times the use of stimulants seems to have been known and understood. A habit or unappeasable desire appears to have been engendered in the human race, which can only be gratified by indulgence in the use of such powerful agents. We have every reason to believe that as a tendency to insanity has doubtless existed from a period when men began to multiply on the earth, so also has its allied mental and physical counterpart, inebriety, been in like manner engrafted on mankind. That this statement is not inference merely, but sustained by abundant testimony, the domain of history proves. Latterly, as men of science have more closely interrogated the antecedents of inebriety, it has been found to bear such a striking resemblance to the characteristics of mental disease, as to possess a claim to be regarded as influenced and governed by the same general laws that bear upon

the "art and mystery" of insanity, to use a phrase employed by Dr. Blandford, in his recent lectures on that subject.

The transmitted tendency to inebriety has been observed by every intelligent physician of experience in the practice of his profession. As individuals are oftentimes unwilling to acknowledge the existence of insanity in the family line, so is the occurrence of inebriety equally concealed or positively denied. People speak of inebriety among their kindred as they would recall lapse of virtue in an ancestor, or conviction of crime. Meritorious deeds and achievements are duly heralded, while vices and faults are scrupulously kept out of view. One is reminded of the publication of a series of successful cases or operations by a practitioner, who suppresses his failures and takes credit to himself for skill and knowledge which others do not possess.

Even among non-professional observers the merely physical tendencies of men and animals have been critically noted. Stock-breeders, with sensitive regard for the worth and quality of horses and cattle, have so particularly and successfully studied pedigree, as to be able on the one hand to avoid and on the other to produce certain defective or valuable traits in the successive issues of the animal.

The study of inherited tendency in the human family, whether of physical or of psychical phenomena, is in many respects complicated and obscure, chiefly because of the lack of reliable statistics on the subject. This deficiency is being gradually overcome, and specialists are drawing more and more liberally from, as well as contributing more and more generously to, the stores of accumulating knowledge in this department. Especially is this the case in regard to all that bears on the question of insanity. We have only to revert to the chaotic condition that enveloped the subject of mental maladies in the early days of Pinel's observations, to be forcibly reminded of the order and arrangement in science that have been created and shaped by reason of the marvellous efforts of that bold and original man. Eighty years is a brief period in the life of a nation or in the history of a system of science. And yet how vast may be the

strides of a nation towards greatness in that space of time, is illustrated in the progress of empire on this continent; and how precise and systematic the construction of a system of knowledge, in the growth and development of psychological science. The written history of psychology, as far as completed, is a summary of minute details, made up patiently and painstakingly, like the gradual uplifting of an island from the sea by the industry of the coral insect. I do not claim that psychological science has reached a state of perfection. It has only approximated general accuracy of results from certain specific observations. It is sifting and winnowing every day the speculative and undetermined from the positive and demonstrated facts which are crowding upon its field of study. It is a system which, in revolving around the great central sun of science, is destined at last to be wholly absorbed in it.

This is the history of insanity in eighty years. It reveals truth emerging from error and superstition, and a long reign of barbarism in science giving place to light and knowledge.

The subject of inebriety is passing through a process similar in all its minute details to that which I have considered. The popular mind does not easily yield its convictions, whether they be properly or improperly founded. The impression is well-nigh universal, that inebriety is a voluntary surrender of the mind and body to the gratification of sensual indulgence, and that a determined effort to reform must of necessity lead to the abandonment of the habit of drinking. This is the belief as well as the language, of the temperance lecturer, who holds up the pledge as the sign and seal of redemption from a self-imposed propensity. It is also the stereotyped teaching of the pulpit, which inveighs against inebriety as a crime akin to arson and perjury, which should not be excused or palliated or compromised, but punished by rigid enactments of law. It is the theory of another class that inebriety is simply "inefficiency of the intellectual force," to be charged to weakened will-power, which resolution, strength and sincere desire of improvement may at any time elevate into healthy and well-ordered exercise. Higher authority than any mentioned, even the authority of the

law, declares the commission of offences while under the influence of liquor to be properly punishable, because the offender, though rendered temporarily insane by indulgence, voluntarily suffered himself to be brought to that state.

In the eye of the law one view is taken of inebriety and in the judgment of science another. We should consider that at one period the law, not as discriminating as now, assumed the entire custody of the insane, whose restraint and confinement, even in cages and with chains; was considered necessary, not for improvement and restoration to mental health, but as a means of punishment and for the protection of society.

Pathology, in the day alluded to, laid no claim to correct knowledge of mental maladies. They were grouped under a strong but virtually meaningless expression, "visitation of God." This phrase, while it is to be commended as acknowledging the dignity and attributes of the Creator and Judge of men, served for centuries as a means of begging the question of insanity, precisely as in our day the theory of self-imposed indulgence in alcoholic and other stimulants is stubbornly believed by the people.

The special treatment of the inebriate, through the accessories of hospitals and modern appliances, though no longer new and untried as an experiment, is far from being generally appreciated or understood. This statement applies to the profession in part and to the people at large. It applies to the profession, because the study of inebriety as a disease and not as a moral lapse, has been superficially considered. In the all-absorbing duties in which we are engaged from day to day, it is difficult to bring the mind to consider a new and unfamiliar principle in medical science, especially if all our previous mental training, influenced by the traditions of the past, conspires to cast distrust and unbelief on the proposed system. A few in our profession share the impression to which I have referred, of antagonism to the doctrine of restoration of the inebriate through the agencies of isolation and treatment.

The question is asked, what do you treat? A habit independent of control; a disordered mind and a perverted will;

or a diseased body, whose crowning honor, the brain, is the seat and centre of pathological change? The proper and successful treatment of inebriety includes all these conditions and much beside.

The habit of indulgence in stimulants, as we view inebriety, is only the fruit or development of a series of morbid physical phenomena, in which the mind as well as the corporeal structures is implicated. I expect to be understood as referring to confirmed inebriety, whether leading to habitual intemperance or to occasional and prolonged drunkenness.

Inebriety being accepted as a physical disorder, many of whose forms and features are no longer equivocal but well-settled and understood, it becomes us to look back in the train of morbid phenomena by which it has been fostered and developed, and endeavor to analyze its near and remote causes. Conspicuously in this connection comes the consideration of inherited tendency.

It is well known that in a searching review of the history of certain families, from a fixed starting point, through lineal and collateral branches, no evidence of inebriety can be found. Immunity from this evil, like vitality in the genealogical tree, spreads and extends from the roots through the trunk and branches to the terminal leaves. Men and women who represent this family, or more properly speaking this idiosyncrasy, will under all conditions and circumstances of bodily pain, mental suffering, pecuniary loss, affliction and disaster, preserve themselves from the consequences of inebriety. It is not through power of will, resolution, superior wisdom, foresight, caution or merit, that this exemption is manifested. Such persons could not become drunkards if they were so disposed. A certain moral and physical predestination, if I may thus use the word, insures and protects them from the hazards of inebriety. No particular grace or excellence attaches to them for avoiding or escaping the consequences of alcoholic indulgence, although grace and excellence may often be assumed as the instrumentalities by which they are spared the evils into which others appear so easily and without let or hindrance to fall.

Such may be regarded as an illustration of entire exemption from alcoholism. Specific physical diseases and deformities, however, may pervade this family and literally freight it with the germs of degeneracy and decay. Consumption or cancer may develop, club-foot, supernumerary fingers and toes, strabismus or hare-lip may set a mark on the family which for an indefinite period is ineffacably retained; or insanity may appear, to be followed along the descent by epilepsy, chorea or other of the neuroses, by hypochondria, imbecility, deaf-mutism, stammering, eccentricity and inebriety.

Here we see inebriety breaking out as an immediate result of insanity, where before the taint had no lodgment. If insanity had not incorporated its tide with the family current, the baleful effects of drunkenness would have been averted. The same remark applies to epilepsy and the other affections enumerated. It applies as well to syphilis, which in addition to its immediate consequences in parent and child, may prove the origin of another and much more deplorable series of physical changes. Involving the cerebral substance, independently of periostitis and destruction of portions of skull, syphilis develops a peculiar form of mental unsoundness, which tends to dementia. To this place of beginning may be traced the diseases already mentioned, including inebriety.

Where inebriety is begotten in a family, directly from an inebriate origin or collaterally by the engrafting influence of insanity, it follows the rules observed in transmitted disease, and overleaping one generation and appearing in the succeeding, or skipping even the third generation, it continually exhibits its disturbing and disorganizing tendencies. A limit, however, is placed on the transmitted influence of inebriety, as on that of insanity, consumption and syphilis, otherwise the race would so rapidly deteriorate under the morbid products of these and other diseases, as after a given period to cease to be propagated. Yielding at last to this recognized law in vital science, the predisposition to inebriety diminishes and ultimately disappears. A habit is continually seen to return to a normal standard of health in the distant removes of the family from the original or engrafted evil.

Inebriety under certain circumstances produces a more sudden outbreak, as shown in children, the issue of legitimate marriage, who die early in convulsions, or who come into the world with small heads, or surviving infancy, lapse into idiocy or imbecility; or escaping these calamities, children pass successfully through infancy and present no apparent mental or physical imperfection; on the contrary, they exhibit precocious talent and grow up with graces of temper and disposition and readily acquire the adornments of education, to inherit in adult life the inebriate natures of their parents.

Thus the vital law holds good and thus the vital process goes on; in one instance illustrated through the influence of marriage in successive generations, which more and more curtails the element of inebriety, until it entirely disappears; and in another, by a system of engrafting; by a remingling of the inebriate habit and disposition, the decaying germ is quickened into activity and breaks forth afresh. To use the language of Dr. Samuel Henry Dickson, in his lecture on "Disease; its Character and Tendency:" "We are born victims of evil influences, which have acted on our parents. We make ourselves victims of such as we voluntarily subject ourselves to, or under the dominion of which circumstances have brought us. We are well or ill, as we have been forced to be by causative agents ever present and inexorable."

These are among the facts which are based on such positive foundations that they cannot be shaken or controverted. They stare us full in the face in the multiplied experience of private practice and in the wards of hospitals and asylums. The laws of nature will be vindicated in the future as in the past, and pathology, like history, repeats itself.

The question settled that inebriety is transmissible, it is pertinent to the investigation of the subject to ascertain if it comes from the male or female line of the family. This suggests the resemblance which the patient bears to father or mother in form, feature, temperament and disposition. It should also include the important fact of the development of the habit in a parent before or after the birth of certain children of the household.

As for instance, sons born previous to a period when inebriety became manifest in the father, have been known to escape its contamination, although exposed in every conceivable way to alcoholic temptation, while other sons, born after the breaking forth of inebriety, upon coming to manhood, by an irresistible tendency, have given themselves up to the same habit. Keeping in mind the increasing or lessening force of inebriety in a family, and its origin or perpetuation in male or female branch, the importance of this scrutiny cannot be over-estimated, in its relations to the ends and results of treatment.

Causes which affect the living race and incline to disease, such as imperfect drainage, overcrowding and deprivation of light and air, are quickly met and removed, as if by an instinctive and spontaneous impulse of our nature, while causes which operate prospectively to shorten the average duration of life, such as inebriety, consumption and various forms of mental unsoundness, are scarcely considered. I have known an instance of contemplated marriage, in which the family on one side exhibited insanity in such a positive and diversified form as to lead to the abandonment of the engagement. This is the only case that has fallen under my notice in which the good sense of individuals, commonly considered blind to consequences, has been the means of releasing them from unfortunate complications. I must confess that I have not been familiar with any instance in which the inebriate condition of near and remote relatives has prevented an otherwise intelligent young man or woman from entering the matrimonial state.

During the past year, out of three hundred and sixty patients admitted to the New York State Inebriate Asylum, the Superintendent, Dr. Dodge, has informed me that forty-two confessed themselves to be the offspring of intemperate parents, representing one in eight. Thirty-six had intemperate fathers, or one in ten. Six had intemperate mothers, or one in sixty. Nine had intemperate brothers and sisters, or one in forty. Sixty-six had intemperate ancestors, exclusive of parents; on paternal side thirty-six, or one in ten, on maternal side thirty, or one in twelve.

These are fragments, merely, referring only to male patients, which go to make up the sum total of statistical accuracy. While thirty-six patients acknowledged the inheritance of inebriety from the paternal source, only six are recorded as claiming its transmission from the maternal side. I do not know what statistics teach as regards the ratio of male and female inebriety in community, but while inebriate men greatly preponderate over inebriate women, it is natural to infer that inheritance of the vice will be multiplied on the male side. Other causes, apart from inherited tendency, go to swell the list of inebriate men, which I cannot now stop to consider.

In the brief space of this paper it is impossible to pursue the whole subject of statistical detail, as it bears upon inebriety. It is an exceedingly interesting as it is a profoundly important theme, and for the proper elucidation of the pathology of drunkenness, it requires to be thoroughly investigated. I would like to dwell upon the influence of nationality in conducing to inebriety, and show the effects of mixed and unmixed races in conspiring to its production. Our population is of such a composite character that this feature of the subject is in itself a vast study. A significant question in this connection, which I am not prepared to explain, refers to the exemption of the Jews in this country, and perhaps in other countries, from the influences of inebriety. This is not an accidental circumstance; facts appertaining to vital science can never be reckoned accidental. It is doubtless in accordance with some fixed and immutable law, such as illustrates the entire history of that wonderful people.

Information so minute, should be obtained in every case of inebriety admitted to public and private institutions for treatment, as will show the nativity not only of the patient but of his ancestors, as far as information can be procured. In this manner, after a time, such deductions may be made as will reveal an interesting chapter in the history yet to be compiled, of inebriety in the United States. Information of this character may exercise an important influence in ultimate legislation affecting the welfare of the inebriate, when efforts are made

to induce State aid in establishing asylums for their care, and laws are modified or enacted to secure to them additional advantages and protection.

Having faith in statistics, I would cause them to tend to the enlightenment of this whole subject with cumulative and effective power. I would interrogate facts and indications in one connection after another, and in one combination with another, so as to compel them to reveal all that can be told of the special bearings of mental, physical and moral agencies on inebriety. This involves a wide range of inquiry. It extends beyond the dogma of inherited tendency and embraces the entire field of physiological, pathological and psychological investigation. The importance of such particular scrutiny is shown, if proof were necessary, in the declaration lately made from a reliable source; "In America, considerably more than one-half of the adult population use either tea, coffee or tobacco. A majority of the remainder use alcohol in one or more of its various preparations. Most of the small remaining minority are included among the not inconsiderable number of those who use opium habitually, and few of us cannot count on our fingers all the persons we know to be total abstainers from each one of the stimuli we have named."* It is said again that the use of stimulants in one form and another, constitutes "a feature of the human constitution." This wide-spread assertion embraces the entire globe. Very few are willing to admit its truth, yet it affords an easy way of explaining, or rather of excusing the habits and vices of moderate and immoderate indulgence in the stimulants mentioned. If this bold declaration is true, we should have the proof exhibited in such a form as forever to settle the question; if it is not true, we should be able as pupils of science, to assert and show, that man was not created to become altogether sensual and debased, and that means and opportunities are held out to encourage his reformation.

The question of the successful treatment of inebriety hinges on the simple fact of *re-formation*—re-formation of the mind and will as well as of the corporeal man generally.

* The Nation.

It requires a nice and delicate, even a minute analysis of the nearly innumerable causes that incline to the production of inebriety, to be able to perfect a system for its radical treatment. It cannot be successfully, that is scientifically treated, until it is thoroughly understood. Inebriety in its component parts needs to be so nicely fitted and adjusted, before it can be put together and perfected into a system of scientific proportions, that its sharp angles and obliquities must be toned down and subjected to the proof and trial of unfailing and convincing tests. Less than this neither the profession nor intelligent people will endorse or accept. This minute and exhaustive investigation of the subject I heartily commend to the specialists before me, whose lives are devoted to its consideration. You will pardon me for speaking thus plainly. I have a desire which is shared by the best men in the profession, to witness the history and management of inebriety placed on the footing of scientific truth and accuracy which illustrates the principles and treatment of insanity. This latter position is one of authoritative science, to the elaboration of which has been directed and is still being directed, the great ability of many of the most distinguished men in the ranks of medicine. Psychological research commands the respect of the enlightened world, because, industriously pursued, from small beginnings and unsettled prepositions, it has grown to the proportions of a well-defined and harmonious system of science. It has become the adjunct of jurisprudence in settling a class of difficult and otherwise inexplicable questions which arise in the administration of justice. The importance of psychology is evinced by the significant fact that the necessities of medical education demand that it shall be taught in the schools. Journals are specially devoted to its investigation, and aided by hospitals and enlightened treatment, it has declared to the world that a large percentage of persons recently insane, some say fifty, others sixty, seventy and eighty per cent., have been restored to their friends and society, who without such timely assistance would have passed into the advanced stages of mental unsoundness.

May we not trace a parallel between the early and specific treatment of insanity and inebriety, and show that equally favorable results may be expected in the latter infirmity, when subjected to prompt and intelligent oversight and care, in a place provided for that purpose? It is waste of time and opportunity, as we have been forced so many times to confess, to treat inebriety as we would treat a self-limited disease, in the seclusion of a patient's home. If I could speak with the authority of statistics on this point, I doubt not the fact would appear that the percentage of recoveries of inebriety increases with the early treatment of the disease. This opinion is sustained by inference, based upon the physical character of inebriety and its general resemblance to peculiar forms of insanity. Such a kinship exists between inebriety and insanity, founded on mental, moral and physical peculiarities, that for the present, at least, it is safe and reasonable to promise results in the treatment of the former, which are shown to be directly produced by guardianship and care of the latter. When the record of your combined experience is given to the world, and the history of inebriety goes on to be written, it will appear, I am confident, among the most prominent maxims and principles in your perfected system of treatment, that to be successfully, that is radically reached and overcome, alcoholism or drunkenness must be brought under hospital restraint and supervision in the forming stages of the disease. The truth of this declaration may seem so apparent to you, as specialists, that it is trite and common-place to allude to it. And yet, because it is not heeded and observed by inebriates and their friends, the former are held longer under the dominion of alcohol, and are in danger of reaching an irremediable stage of the affection, while the latter become disappointed and discouraged, and are disposed to condemn a system which gives so little hope of relief; and upon you, with whom rests the responsibility of the personal care of this class of patients, increased watchfulness and solicitude are imposed, and the tormenting thought springs up again and again, how different, with the blessing of Heaven, might have been the expectation and the issue, if early advice and discipline had been sought.

While life insurance companies attach great importance to the hereditary influence of consumption, cancer, insanity and other specific diseases, they do not appear to be fully alive to the fact that inebriety, to as marked a degree as any transmitted physical condition, is handed down through the family line. It is conceded that a not inconsiderable amount of loss sustained by these companies is directly or indirectly produced by inebriety. The clause or condition to which an applicant for insurance consents, that he will not practice any evil or pernicious habit that tends to the shortening of life, seems as inapplicable in connection with the question of inherited inebriety, as a promise to avoid insolation by screening the head from the vertical rays of the sun, or pneumonia and rheumatism by adequate clothing and protection from cold and dampness. Inebriety in such a case is no more self-imposed than insolation, pneumonia or rheumatism. We may go farther, and assert that a person seeking to insure his life may with equal propriety declare that he will endeavor to escape the consequences of prostatic disease, aneurism or cerebral abscess. At the time of effecting insurance he may be as free from the expectation of inebriety as of insanity, if neither exists in his family. In this manner inebriety and insanity may be designated, with prostatic disease, aneurism and cerebral abscess, non-preventible affections, from which nothing more than ordinary care will protect an individual.

Freedom from the expectation of inebriety implies that a man has not contracted any habit that immediately or remotely tends to the use of alcoholic drinks. If inebriety is not a morbid element in his family, and his health in every particular conforms to the standard required by the insurance company, being accepted under the restrictions imposed, constitutes a good risk. If, on the contrary, the party comes up to this mark of physical excellence, which would entitle him to admission to the Naval School or the Military Academy, and it can be clearly shown that a well-defined seal of inebriety has been set on his family for an indefinite period, under the operation of a great vital law, the risk ceases to be good and becomes at once so bad in the

scientific estimate of drunkenness, as to lead to its prompt rejection.

Life insurance companies seem to be satisfied with the condition of an applicant for insurance at the time he makes reply to the questions of the medical examiner and is passed by him. If the person to be insured is sober and temperate in his habits of life, and the medical officer is satisfied that his statements are true, the family history in respect to inebriety appears to have no bearing on the final judgment of the physician or the home officer. Explicit as the information is expected to be concerning consumption, scrofula and rheumatism, which by some companies are particularly specified among the affections to which the party may be predisposed by hereditary or acquired tendency, no allusion is made to inebriety, which is positively transmitted as well as being a confirmed habit in society. If insurance companies charge higher rates to persons whose employment is specifically hazardous, or who travel in foreign countries, they should exact additional premium in all risks taken on the lives of inebriates. No dangers which arise in the ordinary mechanical and industrial pursuits of our country, such as the operations of railroads, steamboats, factories, and even coal-mining, compare with the hazard to life which immediately results from inebriety. I am at a loss to perceive in what way insurance companies are adequately protected from the consequences of disaster in this direction. They would not, I am sure, take risks in an organization of stalwart men about to go forth to resist invasion, or to meet an armed enemy in the field, or to engage in the desperate emergency of a forlorn-hope. Nor would they willingly insure persons engaged in the manufacture and sale of liquor, and yet representatives might be found among this class, to whom I have referred, who would not, under any circumstances, yield to the alcoholic habit. They would also decline to take risk in a man in whom the hemorrhagic diathesis existed, in whose case the extraction of a tooth or the slightest wound might compromise life, especially if it appeared that he inherited such a predisposition to bleed.

Refusal in this way to incur extraordinary risk signifies laud-

able caution in business, founded on knowledge and experience. It is in the broadest sense a commercial aspect of probabilities.

Let the fact appear to the satisfaction of life insurance companies, that in taking risks in which an inheritance of inebriety is involved, they assume responsibility which must ultimately entail pecuniary loss, and they will at once demand an authenticated record of the personal habits and cause of death of the near and remote kindred of the applicant. This will open the entire family history for inspection, without which source of information, knowledge of inebriety, insanity, consumption and other inherited diseases cannot be acquired.

More than thirty years ago, the Supreme Court of the State of New York was called upon to decide in a case in which the administrators of a suicide brought action against a life insurance company for the amount of a policy on his life, in the granting of which it was stipulated by the insured, that if he should die upon the seas or by his own hand, or in consequence of a duel, or by the hands of justice, the policy should be void. The judgment of the Court, expressed by Chief Justice Nelson, was that the self-destruction of the party in a fit of insanity cannot be deemed death by his own hand, within the meaning of the policy.

A similar doctrine, I am confident, has led juries, not however under instruction from the bench, to declare in several instances, that death from the immediate effects of inebriety in the insured, has not exonerated insurance companies from liability of the payment of the policy to the legal representatives of the deceased.

Inherited inebriety particularly, and acquired inebriety in special instances, which goes on rapidly or slowly to death from ordinary physical disorganization or from self-imposition, does not necessarily, and I speak reverently on the subject, bring the victims within the limits of moral accountability, any more than the acts of those who are clearly and incontestably declared to be wholly insane. The moral as well as the physical law interprets inebriety under such circumstances to be specifically a disease, and the insurance company that undertakes to contract

with an inebriate by inheritance, and thereby incurs liability in consequence of death from the habit, ought justly, I think, to be compelled to pay the penalty of its venture.

Additional observation on this subject, will, in the end, lead to the adoption of such strict rules by life insurance companies, as will cover the probabilities of inherited disease and exempt them from the hazards to which, according to the method of accepting risks now in force, they are in no reasonable degree excluded.

TEMPERANCE AND INTEMPERANCE. THE DISEASE AND ITS REMEDY.

BY OTIS CLAPP, PRESIDENT OF WASHINGTONIAN HOME, BOSTON, MASS.

The simple word temperance, is one of the most comprehensive in our language. It is coupled with the highest virtues given by God to man.

Worcester defines it thus:—

“Moderation, opposed to any improper indulgence.”

Milton says:—

“Observe the rule of not too much, by temperance taught,
In what thou eat'st and drink'st.”

Shakspeare says:—

“Ask God for *temperance*, that's the appliance only
Which your disease requires.”

Intemperance, of course, is directly the opposite, the excessive indulgence of appetite; the perversion of what is good.

Milton says:—

“Some, as thou saw'st, by violent stroke shall die;
By fire, blood, famine; by *intemperance*, more,” &c.

The apostles also name temperance among all the godly virtues.

Temperance, therefore, seems to be the *right use* of all the

faculties which God has given to man; and intemperance, the *perversion* of these faculties.

The creation of the world and the creation of man, are regarded by men of thought, as types, one of the other.

Thus, in the first chapter of Genesis, we are told that "God created the heaven and the earth"—that "the earth was *without form* and *void*," until "the spirit of God moved upon the face of the waters." He said "Let there be light, and there was light." "And God saw the light that it was good," and "divided the light from the darkness." He "called the light day," and the darkness, night. This applies to the creation of man, as well as of the world.

Then come in course the firmament; the waters; the dry land, or earth; the herb yielding seed; "and the tree yielding fruit, whose seed was *in itself* after his kind"—the two great lights to rule; one by day, and one by night—the whales, winged fowl, beast, cattle, and every creeping thing, after their kind. "And God blessed them, saying, be fruitful and multiply."

When this was pronounced good, "God said, Let us make man in our image, after our likeness, and let them *have dominion*, over the fish of the sea, the fowl of the air, the cattle, the earth, and every creeping thing."

He blessed them, and said, be fruitful and multiply; replenish the earth, and *subdue* it.

How profoundly suggestive are these words of truth, yet unrevealed!

Thus was man introduced into the world by his Creator, to have "dominion over" it and to "subdue" it.

"*Man*," says Bacon, "is an animal as well as a brute, but he is something more."

Young says also:—

"How poor, how rich, how abject, how august,
How complicate, how wonderful, is *man*."

Pope also says:—

"Know, then, thyself; presume not God to scan;
The proper study of mankind is *man*!"

Shakspeare too says:—

"His life was gentle, and the elements
So mixed in him, that Nature might stand up
And say to all the world, This was a *man*!"

Solomon learned how to have dominion, and how to exercise it. The reason was, that he had extraordinary wisdom and judgment.

And what was this wisdom?

It was so very simple, that the world overlooks it. Solomon asked the Lord to give him "an understanding heart to judge thy people, that I may discern between *good and bad*." This "speech pleased the Lord that Solomon had asked this thing! and *not* asked 'long life,' 'riches,' or 'the life of his enemies;' but hast asked for thyself understanding to discern judgment."

Is this the popular, or prevalent opinion, or practice, in human affairs?

The record goes on, "behold I have done according to thy word: lo I have given thee a wise and understanding heart." "And I have also given thee that which thou hast *not* asked, both riches and honor."

Such were the conditions which lie at the foundation of a true understanding, of intelligence, wisdom and manhood.

We now come to the consideration of the causes which obstruct the growth of this manhood.

Prominent among them are two kinds of drunkenness.

The 1st is Inebriety, caused by the excessive use of intoxicating drinks.

And the 2d, is that spoken of by the Prophet Isaiah, "Drunken, but not with wine."

These two kinds appear to be the source of nearly all the ills that flesh is heir to.

I propose to speak briefly of inebriety, or intemperance, in the form in which it presents itself for treatment by members of this Association. The experience that has already been had has demonstrated that inebriates *can be reformed*. All of our inebriate institutions, as well as judicious private efforts, show

this. Strange to say, a large majority of both thinking and unthinking men do not seem to believe it.

Among the difficulties which our cause has to encounter, is the fact that legislators are often too wise to either learn or unlearn. They are so intent upon adhering to favorite theories, that the importance of saving men and women from intemperance, and restoring them to a life of sobriety and usefulness, in their families, and in society, is entirely overlooked. Some striking illustrations have occurred in our State, the last year.

A learned ex-president of one of our leading colleges, wishing to subserve the cause of science and education, was so intent upon obtaining an appropriation from the State, to aid in preserving fish, reptiles, and bugs *in* alcohol, that he lost all heart for that part of humanity which needs saving *from* alcohol. He was therefore faithful to his convictions; and his speaking and voting were in accordance therewith.

Another distinguished legal gentleman declared in an eloquent speech, that he should as soon think of establishing an ice-house in the infernal regions, as to reform a drunkard in the presence of dramshops. Although a veteran in legislation, his statesmanship had not reached the fact, that the best of all places to overcome temptation, with all true manhood, is *in the face* of the very temptation which is to be overcome! He had abundant opportunities to test this fact; but it was passed over as unworthy of attention!

But these are by no means exceptional cases; and they only go to prove that the work of education, and of reform, have but just begun.

A commission was appointed by a resolve of the Legislature of Massachusetts, who made a report to the Governor and Council in 1870, on the expediency of establishing inebriate asylums for three classes. The following extracts will show their views upon this branch of the subject:—

“The main question to be answered is, What can be done to reform the inebriate? The number who need assistance may naturally be divided into three classes:

“*First.* Those who honestly desire to reform their drinking

habits, and who will voluntarily go to an institution for this purpose, and co-operate in the means necessary for their reformation.

“*Second.* There is a class who do not desire to reform, but will get drunk whenever they please. This class are very troublesome to their friends, and should, at such times, be restrained.

“*Third.* Another class have, from excessive drinking, become demented, and lost the power to reform. They need to be placed where they can be at work, and kept from temptation. Many are in prisons, committed for drunkenness, both male and female.”

The commissioners report and recommend bills for the establishment of two Inebriate Asylums, drawn up by two judges, who have had large experience in the courts, intended to meet the wants of the Second and Third Class, above named.

They then add:—“Asylums are wanted for reforming females separate from the male department, and under the care of ladies.

“It may aid in gaining a clear idea of the needed curative agencies, by considering briefly the nature and extent of the evil which it is proposed to remedy.”

They then give some information under the head of CONSUMPTION AND COST OF INTOXICATING DRINKS.

The cost for drinks in this country is estimated to be at least \$500,000,000; some estimate it as high as \$600,000,000.

The consumption of beer in England is about 120 gallons yearly, to each adult male.

By a recent estimate made in the Bureau of Statistics in Washington, the cost of spirits consumed in this country in one year, is estimated at \$600,000,000; or more than one-quarter of our National debt.

It is estimated also that there is an army of 600,000 drunkards in this country; and that 60,000 of them die yearly. It requires, therefore, this number of new recruits each year, to fill up the ranks, and to keep them full—which number are

readily prepared and furnished from the ranks of moderate drinkers.

The Report continues:—

“According to an estimate given by the special commissioners on the revenue, of which Hon. D. A. Wells was chairman, the amount of distilled spirits ‘used for drinking purposes’ in the United States for the year ending June 30, 1865, was thirty-nine million gallons. They estimated the amount of fermented liquors, such as ale, porter, and lager beer, for the same year, at six million barrels.

“They estimated also that the consumption of these drinks increased at the rate of ten per cent. per year.

“This would make the consumption for the year 1870 nine million barrels, which, at forty gallons per barrel, would be three hundred and sixty-million gallons.

“This, with imported wines and spirits, amounting to about eleven million gallons the last year, and thirty-nine million gallons of domestic distilled spirits—leaving out all domestic wines and brandies—makes a consumption of four hundred and ten million gallons, which is over ten gallons for each man, woman and child in the country.

“There is a table appended to the same report, which gives some idea of the cost of these drinks. This table gives the ‘sales of merchandise’ in the United States, derived from the internal revenue returns, in one year, at near twelve thousand million dollars (\$11,870,337,207).

“Of this, the amount of sales under the two heads of ‘Wholesale’ and ‘Retail Liquor Dealers,’ was over two thousand million dollars (\$609,278,050 for the first, and \$1,483,491,865 for the last).

“Persons who paid a special tax as ‘wholesale,’ or ‘retail liquor dealers,’ were allowed to include the sale of other merchandise under the same license.

“If, therefore, we allow three-fourths for the sale of other merchandise, and for spirit included twice (which seems large), it leaves over \$500,000,000, or nearly one twenty-fifth part of

the whole amount of these ‘sales of merchandise’ returned to the internal revenue, as money spent ‘for drinking purposes.’

“The consumption of this vast amount of liquors, will readily account for the intemperance which exists throughout the community.

“Intemperance changes its subjects from the productive to the unproductive classes, and thus makes them a burden upon the community.

“It disturbs the powers of production; causes preventable sickness, and preventable death.

“A familiar illustration of its disturbing effects upon labor, is shown by this fact. One of our wealthy religious societies recently built an elegant place of worship. It is estimated that the time of completing the same was prolonged six months in consequence of intemperance among the workmen.

“The same disturbing and costly influences extend to nearly every branch of industry. To estimate the extent of the loss resulting therefrom, is no easy matter. It was estimated by our War Department that each soldier in the Mexican war cost the country \$1000 per year. The expense at this time would be much more. But even at the former rate, an army of six hundred thousand drunkards would be a loss to the community of six hundred million dollars per year; a sum sufficient to pay the national debt in four years.

“The labor of intemperate persons is not entirely lost, but is greatly impaired. Such facts may aid to show the extent and cost of the evil, and the importance of remedial measures to reclaim as many as possible.”

A well conducted Inebriate Asylum aids in the work of prevention.

Prevention is less costly, than punishment.

The cost of the clergy of the United States is estimated at \$12,000,000 annually.

While that of criminals is \$40,000,000, and of spirits \$600,000,000.

The true wealth of a community depends upon the character and quality of its members.

The comparison in value between *man*, as a sober and virtuous citizen, and *man* as a drunkard, or criminal, is sufficiently striking.

In one case he adds wealth to the community. In the other he adds only to its burdens.

This is shown by the fact that the average productive value of a skilled laborer's services, during the productive period of life—say from 15 to 70—55 years, is estimated at \$50,000. If the same person had to be supported for the same period as a criminal, he would burden the community from \$20,000 to \$30,000; thus making a difference of from \$70,000 to \$80,000 in the lifetime of a single person.

It is a striking fact, that the cost of a home in a prison in Massachusetts, consisting of a single room for a single prisoner, costs the community more than the average value of all the homesteads, for all the families throughout the State.

The effect of intemperance upon the productive industry of this country, is almost beyond conception. This may be shown by a few illustrations.

The statistics of Industry in Massachusetts for 1865, amounted to over \$517,217,613.

If we allow but ten per cent. for loss caused by intemperance, the loss is over \$51,721,761, per year.

This amount of production is over one and one half million of dollars for each and every working day in the year.

The loss therefore, at ten per cent. is \$150,000 per day.

The value of manufactures in the United States (as shown by the census of 1860), was about nineteen hundred million dollars (\$1,885,861,671).

The value of agricultural products also was about two thousand and six hundred million dollars (\$2,600,000,000).

The two amount to near four thousand and five hundred million dollars (\$4,500,000,000).

The loss to the productive power of the country, through intemperance, is estimated at from 10 to 20 per cent. If we call it 10 per cent. only, the loss on these two classes of pro-

duction reaches the sum of four hundred and fifty million dollars (\$450,000,000).

The census of 1870, not yet complete, will show this sum to be vastly increased, and perhaps doubled.

The yearly cost of intemperance or drunkenness to the body politic, in this country, directly and indirectly, in the wear and tear of life, in shattered nerves, loss of labor, diminished production, sickness, pauperism, insanity, idiocy and crime, would pay off the national debt every year.

What is the lesson of the Chicago, and other fires; the numerous railroad and steamboat accidents; and other kindred horrors? Are they not to be accepted as illustrations of the fact, that the *will* and *understanding* of man *has fallen*; and mainly through the agency of the two kinds of drunkenness here referred to; and that they therefore need a *re-creation*?

In conclusion, I have to say, that the object in preparing this paper has been, to recognize—though briefly, and imperfectly—the Divine Creator of man, and of the laws and faculties which He has given him for use. When man departs therefrom, he must suffer the penalties prescribed. But there is still a Divine way for him to be restored, if he is willing to recognize and obey the conditions imposed.

It is the object of our Inebriate Institutions, as I understand them, to act upon the instructions of the Prophet as *The Repairer* of the breach, *The Restorer of Paths to dwell in*: Isaiah lviii. 12.

All these institutions can show encouraging results, amid many discouragements. Let them persevere in the good work. Let us bear in mind the old adage, "that he who has God on his side, has always a majority of one." Let us all bear witness according to the light that is within us, in hope and faith, that the clear light of day will soon begin to dawn upon a fallen world.

ON THE PATHOLOGY OF INEBRIETY.

BY GEO. BURR, M.D., OF BINGHAMPTON, N. Y., TRUSTEE OF NEW YORK STATE
INEBRIATE ASYLUM.

Inebriety has, at length, come to be regarded as a disease. Under the names of dysomania (*thirst craziness*), or methomania (*an irresistible desire to drink*), it has found a place in the catalogue of disorders. It is not, however, a new fangled notion, or a novel idea to regard the intemperate use of ardent spirits as the result of a morbid condition. Nearly sixty years ago Dr. Rush referred drunkenness to a morbid state of the will. To effectively treat the subjects of this disease he recommended "the establishment of a hospital in every city and town in the United States, for the exclusive reception of hard drinkers." "They are," he remarks, "as much objects of public humanity and charity as mad people." Esquirol distinctly recognizes the existence of a disordered condition of the system, which leads certain individuals to the abuse of fermented drinks. "There are cases," he continues, "in which drunkenness is the effect of accidental disturbances of the physical and moral sensibility, which no longer leaves to man liberty of action." Dr. Robert Jamieson, of Aberdeen, speaks of the propensity to drunkenness "as a morbid impulse, forming a variety of moral insanity, referred to under the name of dysomania. In 1833, Dr. Woodward, of the Worcester, Mass., Insane Hospital, in a series of essays maintained that intemperance was a disease, and declared, from his own experience in the management of many hundreds of intemperate persons, who had committed crimes which rendered confinement necessary, or who were insane in consequence of this habit, that this disease was amenable to treatment, and that "a large proportion of the intemperate in a well conducted institution would be radically cured, and would again go into society with health re-established, diseased appetites removed, with principles of temperance well grounded and thoroughly understood, so that they would be afterwards safe and sober men." Dr.

Isaac Ray, while he is inclined to believe that this condition is the effect of a long continued voluntary habit, yet affirms that "there is strong evidence in favor of the idea that they (the pathological changes) in turn become efficient causes, and act powerfully in maintaining this habit, even in spite of the resistance of the will."

Opinions of a more recent date, confirming this view, might be quoted *ad libitum*; but the foregoing are sufficient to establish the proposition already laid down, that it is no novel or new fangled idea which refers the phenomena of drunkenness to morbid causes, and to a diseased condition of the system.

In considering the subject of inebriety as a disease, we must bear in mind that it is the propensity or desire to indulge in the use of ardent spirits, and not the habit of drinking to excess, or drunkenness, and its subsequent effects upon the economy of the human system that is to be regarded as the morbid condition. A broad distinction must be made between the two. The latter is but the development of the former. The propensity when under the influence of exciting causes, arouses the appetite, overcomes the will, blunts the moral sensibilities, and makes every thing else subservient to its demands. The habit is the natural sequence to the growth and development of the propensity. The one bears the same relation to the other, that the eruption of small pox bears to the contagion of that disease, or the several stages of an intermittent fever, to the poison of malaria. The delusions of the insane are but the morbid phenomena of mind disordered; so the love of the bowl, and the self-destructive acts of the inebriate, are likewise the manifestations of a condition of the organism that may well be regarded as *diseased*. In most of that which has been written and spoken upon the subject of intemperance, in the vast number of books, pamphlets, and speeches with which the country has been so profusely supplied, during the last forty years, the sad consequences of indulgence, the woe which it brings upon body and soul, the destruction of hopes, and the ruin of everything most dear, have been the leading topics of thought and discussion. The condition of the system, which Marcet calls alco-

holism; the organic changes and functional derangements consequent upon the practice of excessive drinking, have all been thoroughly studied and described, and are well understood and easily recognized by the medical profession.

It must be evident, however, that these changes are but the *consequences* of the pre-existing malady, and that they constitute only the *morbid anatomy* of inebriety. What, then, is the true pathology of this disease? Where is its seat? Why do men drink? What is the secret of that terrible propensity which impels them to put forth their hand to take the intoxicating cup?

To answer these inquiries fully and satisfactorily, requires a degree of knowledge relative to the intricate and complicated operations of his own organism, which man has not yet arrived at. That the seat of the disease is much more remote, and that it is more intimately related to the ultimate and more recondite operations of the economy, than the opinions which have usually been held would lead us to believe, we cannot but admit; but in what tissue and by what change of structure do we have the first intimation of the morbid propensity to drink? The early stages make no revelations. The unhealthy sensations that first call for alcoholic stimuli, make no changes that can be located. As in some forms of insanity, the knife of the anatomist would be unable to reveal the slightest aberration from a normal condition in any of the structures. It is only when the propensity has gained the ascendancy, when the habit of excessive drinking has become established, that we begin to find the morbid changes and the anatomical lesions.

A careful study of the phenomena of inebriety, and a just appreciation of its symptoms will enable us, however, to obtain an inkling, at least, of the true pathology of this terrible malady and curse.

The more prominent symptoms of inebriety are great nervous irritability or restlessness, unnatural sensations, an uncontrollable desire for strong drink, and a disposition to frequent fits of intoxication from the use of ardent spirits. These all indicate that the nervous tissue is the seat of the morbid

influence. The symptoms enumerated are those of morbid sensation, of perverted taste and appetite, of disorder especially in that portion of the nervous mass in which is evolved the desire for alimentary material, or hunger and thirst. The disordered sensation and perverted taste, are not unlike the emotional and intellectual disturbances that characterize insanity, and more especially are they similar to the hallucinations of the insane, to those impressions made upon the eye and ear, which give rise to sights and sounds entirely imaginary. Disorder of the nerves of taste creates a desire for strong alcoholic beverages, which nothing else will satisfy. The same disorder affecting the apparatus of hearing, conveys the impression of supernatural voices, or of strange and anomalous sounds. In the morbid manifestations of one we have metho-mania or drunkenness; in the other we have perversions of the moral sense, homicidal impulse, hallucinations, delusions, &c.

According to Prof. Reid, the seat of the abnormal sensations in this disease, is in the encephalon and not in the stomach, or in the pneumogastric nerves. This opinion is formed from the fact, which he ascertained, that the sensations of hunger and thirst continued after both these nerves had been divided; or rather, that animals which had undergone such an operation would frequently partake of food with some degree of eagerness. The effect, however, of such division upon the stomach, in causing nausea, regurgitation of food, and other disturbances in digestion, was so marked and decided that we cannot doubt but that disorders and functional derangements of the pneumogastric nerves, would have their share in creating morbid propensities and uncontrollable appetites.

The sense of taste, likewise, is perverted in this disease, causing the palate to tolerate many an article which, in a normal state, would never be allowed to pass the faucial isthmus.

In the anatomical structures then, the seat of the morbid propensity to drink must be referred to that portion of the brain which takes cognizance of the nutritive operations of the body; to the nerves of taste, viz., the third branch of the fifth

pair, and to the glosso-pharyngeal, or one of the eighth pair; to the trunks of the pneumogastric nerves, and to their terminal branches upon the mucous membrane of the stomach. It is probable that in the earlier stages, only a part of these structures is involved; but that, as the disease advances and the habit becomes fixed, the healthy operation of the entire apparatus is perverted and changed.

The affection of the brain in these cases is not unlike the condition of another portion of the encephalon in aphasia, by which, according to Dr. Hammond, "is understood a condition produced by an affection of the brain, by which the idea of language, or of its expression is impaired."

In what the morbid condition consists, what molecular changes in the nerve substance, that is characteristic of this disease, as has already been remarked, has not yet been revealed to us. That there is some such change we have good reason to presume. In the normal state of the appetite and taste in different individuals, strong preferences or aversions for or against particular articles of food are to be noticed. These differences indicate a dissimilar molecular arrangement of the organs of taste, as the various inclinations and bents of the mind, in favor of different pursuits in life, would indicate not precisely the same conformation of brain. All the variations in character that are to be witnessed, probably depend upon corresponding changes in the texture of one or more of the tissues of the body. The astronomer cannot have precisely the same organization as the dancing master; neither would we expect the nerve tissue of the sculptor or the poet to be precisely similar to that of a prize fighter, or a hangman.

Of a certain grade of diseased taste and appetites, we have examples in the capricious demands of the stomach in chlorotic females, in certain longings during the period of gestation, in the voracious appetite often seen in dyspepsia, and in the thirst of diabetes. These conditions are generally transient, or, if persistent, they rarely exceed certain limits. Instances have occurred, however, of the grossest excess in devouring slate, clay, chalk, and other similar substances by females whose appetite and taste, had become perverted by disease.

The opium habit, as it is termed, is another instance of morbid appetite, depending upon causes similar to those exciting inebriety; and there are few physicians, I apprehend, who have not witnessed instances of extensive disorder, manifested by excessive fondness for coffee and tea.

Inebriety is peculiar to man. No other created being is subject to its attack or falls into habits of intemperance. Let us inquire why this is so, as a part of the natural history of drunkenness.

The necessity for food and drink is universal. Every organized being is subject to waste, and requires repair. In the vegetable, and in the lower orders of the animal kingdom, the process is carried on without anything like sensation. A tree absorbs its nutriment, and assimilates it without being conscious of the operation. The higher order of animals have a perception of their wants, they feel the sensations of hunger and thirst, and instinctively set up the movements necessary to satisfy the demands. We have no evidence, however, that the sensations perceived, are anything more than the results of organic changes, caused by a want of alimentary material. The animal has no intellectual cognizance of its appetites—it eats because it is compelled to do so by hunger. When satiated it reposes content, without mental emotion or intellectual thoughts as to the nature of hunger, or the means necessary to satisfy its demands. In man it is different. His appetites, under the directions of the intellect, are elevated and exalted above those of inferior animals, and are designed to increase his delights and gratifications. In this respect, the organs of taste are not dissimilar in their operations to the other special senses. For instance, the eye of an animal in structure is like that of the human eye, except variations in size, and some slight deviation in shape. The rays of light pass through the different media in accordance with the same philosophical law. The eye of the animal enables it to distinguish the presence of objects which surround it. Those which it may be necessary for it to avoid, or those which may serve to direct it safely in its perambulations; but we have no evidence that its percep-

tions extend further. The animal perceives nothing of the beauties of the landscape; the gorgeous appearance of the heavens are unobserved; the most exquisite views of nature and of art are lost upon it. And why? Because the animal has not sufficient intellect to understand and appreciate them. The same is true of the organ of hearing. The animal distinguishes all sounds necessary for its safety, and for all the purposes of its existence. And certain sounds, like familiar calls, will often awaken something like memory, and even gleams of intelligence in them, as when a dog recognizes the call of its name. But the most exquisite harmony, or the finest musical notes, give the animal no pleasure, nor do they apparently awaken any emotion, unless it be that of fear. But the human eye and ear, under the direction of the intellect, are sources of the most delightful sensations and emotions, and bring the soul of man in direct relation with the world around him.

The more highly cultivated and refined the perceptive powers become, the more exquisite and sweeter the gratification; but there is not a human being so low in the scale, but that sight or sound, begets in him some pleasurable, mental or emotional movements.

The appetites of man are of a higher order than those of the animal creation, made so by their association with his superior endowment of the intellect. They are capable of more extended combinations, and are susceptible of greater cultivation and refinement. What we have seen may be done with the eye and ear in man, may also be done with the palate, and thus by proper training, an act necessary for the sustenance and nutrition of the body may be made to be the source of a pleasurable and rational enjoyment. With any advance from a barbarous state, there is a corresponding improvement in the modes of living, and in those nations who have been the longest civilized, we find the most elaborate dishes and the most perfect tastes. It is this faculty, for so it must be called, which becomes disordered and deranged in the inebriate; and it is this superior or higher endowment in man, that makes him of all others, liable to drunkenness. The mind is gratified, and its emotions

awakened by the same indulgence which satisfies hunger and thirst. Upon what other principle is it, that our tables are loaded, and that feasting is indulged in, when we rejoice on the return of every Christmas, or when we desire to publicly express our thanksgiving to Almighty God?

Many facts lead to the belief, that there exists a natural or a normal appetite in man for stimulants, to be taken with food or on occasions of merriment and rejoicing. The desire for condiments, and the universal use of tea and coffee, indicate that such is the case. The same may be said of the desire for alcoholic drinks. From the earliest period man seems to have indulged in the use of intoxicating beverages. In all ages and in every state of society, the propensity has been remarked, and the practice been followed, where there has been sufficient intelligence to provide the means of gratification. One of the first acts of Noah, after leaving the ark, as recorded, is, that "he planted a vineyard." The next record of him seems to have been a natural sequence of the first, and illustrates the characteristic tendency to a morbid propensity, which the flood had failed to remedy, "and he drank of the wine and was drunken." It was the practice of the earliest nations, on all occasions of rejoicing, to indulge in the use of stimulating drinks. Ample testimony may be cited from the writings of Heroditus, Xenophon and other ancient historians, as to the custom of the Egyptians and Greeks in drinking not only wine but malt liquors. Joseph in Egypt in feasting his brethren, not only set on bread, but furnished the means of exhilaration; for "they drank and were merry with him."

The people of Egypt and Greece, though the centres of civilization of their age, were characterized by their bacchanalian tendencies, and even in their conceptions of the gods, both Isis and Jupiter presided in heavenly revels, and quaffed their nectar while deliberating over the destinies of men. In Bacchus we have this propensity deified. He is represented with all the attributes of a god, as traversing the world like an earnest missionary, contending for the blessings of the vine and the pleasures of drunkenness.

In the lowest tribes, like those inhabiting some portions of Africa, whose intelligence was so low that they had never stumbled upon the art of making fermented liquors, and in whom consequently this propensity had never been manifested, yet with the first taste from the hand of others, it burst forth with the fierceness of a conflagration. Such is the universal testimony of all African explorers. The same is true of the North American Indians. They, I believe, knew nothing of the use of fermented or ardent spirits, until after the landing of the white man; but when the cup was presented to their lips they clutched it with all the ardor of veteran toppers. Until then they had satisfied this natural inclination for stimulants, by the use of tobacco.

These instances indicate the natural desire of man for stimulants, which under proper subordination and moderately indulged in, could be a source of enjoyment and pleasure. It is this propensity becoming diseased, that causes that uncontrollable desire for strong drink, which gives rise to the phenomena, and which entails upon the unfortunate subject of the attack, all the evils of inebriety.

Inebriety presents itself under various phases and assumes diverse characteristics. One class of inebriates are termed constant drinkers. In them the propensity seems to be always present, urging the subject of it to daily indulgence. The use of alcoholic drinks with this class is a continuous habit, and as the disease progresses, in its latter stages, every night finds the victim in a state of intoxication. Persons of this class are solitary drinkers. The propensity is not excited by either social or convivial incentives; but the indulgence is caused by an irresistible desire for drink.

This form of inebriety is the most obstinate, and the prospects of reform or cure is much less than in some others, and it is only by the strongest restraint, and the most persistent efforts that any improvement can be made.

Another class of inebriates are subject to paroxysms of drunkenness, with intervals of greater or less duration, when they are entirely free from the habit, and feel no propensity to

drink. The attacks are periodical in their character, and in this respect they are not dissimilar to other forms of periodic disease. The intervals vary materially in duration, some lasting only a week, others continue a month, six months, a year, and even longer periods have been noted. Dr. Van Anden, of Auburn, related to me a case in that city, where a period of eight years elapsed before the paroxysm of drunkenness returned. The periodic form is probably the most common. A large portion of the drunkenness under observation is of this character. The paroxysms appear to be excited by opportunities for gratifying them, such as visits from the country to our larger towns, the frequenting of drinking places, &c.

A not uncommon form of the tendency to inebriety, is manifested especially in young men, in whom the propensity is not fully developed. This consists in the practice of occasional *spreeing*, as it is sometimes termed. This forms one of the earlier stages of the habit or attack, and may be properly termed the formative stage. It makes its appearance on all occasions of rejoicing, at festivals and celebrations, on Fourths of July, and during the holidays. At other times the propensity is dormant, and the individual is in no way affected by it.

There is a feature in this malady, which may be properly noted in this place, and that is, that in the advanced stages of the disease, nothing satisfies but complete intoxication. So completely is the system under the influence of the morbid propensity, that the desire to get drunk is irresistible. No lesser degree of exhilaration or excitement answers—nothing but total obliviousness satisfies the craving propensity.

Inebriety makes its approach as other diseases make theirs, sometimes by the fault of the individual attacked, and at other times from causes over which he has no control.

The propensity is quite often hereditary, and transmitted from one generation to another, in accordance with the same law by which any constitutional taint, like scrofula or tubercular disease is handed down.

The law of development which, from the germ, fashions and matures an individual, and by which it is made to resemble its

prototype or parents, will also in due time bring forth the defects which may have existed in a previous generation. The fact is a familiar one, that children resemble their parents to a certain extent in mental characteristics, disposition, peculiarity of constitution, temperament and form. They are however not born with all these characteristics present, but as the child is developed into the man, they one after the other make their appearance. With the development of consumption under this law we are all familiar. The child is born with a tuberculous taint. During the years of its childhood it may be well and sprightly, may keep pace in growth with the most robust; but in the course of its development it reaches a point where its prototype fell into decay and died. This individual will do the same.

A tendency to drunkenness will be developed under the same general law. The child will give the fairest promise, its youth will be one of innocence uncontaminated by evil influences, and the first years of manhood will be free from spot or blemish; but the critical period arrives, and suddenly like a fatal cancer, there is developed this morbid propensity. The man becomes changed, his appetites are aroused, his whole nature undergoes a transformation, and the prospect of his early years is blasted by drunkenness. No condition in life is exempt from such instances. We meet them everywhere; in the pulpit, on the bench, at the bar, in the church and among "all sorts and conditions of men."

The period in life at which the propensity to drink is developed, varies in different individuals. In some it appears in early youth, in others in the first years of manhood. The great number of young men addicted to the intemperate use of ardent spirits, who are to be found in our large cities and principal towns, are examples of this class. Cases also occur where late in life the propensity first makes its appearance.

Other forms of drunkenness are apparently brought on by disturbances or by great excitation of the emotional nature, or by the depressing passions, especially by grief, disappointment, mortification, shame or loss of property, &c. In many cases

the exultation following the accomplishment of some successful undertaking, excites a paroxysm of inebriety. I have been led to believe that this form of emotional excitement is more frequently the immediate cause of an attack, than those disturbances attended by depression of mind. The rapid accession to fortune, political distinction, success in any enterprise, are very often the precursors and excitants to a course of intoxication.

The practice of tippling has heretofore been regarded not only as the ordinary, but the sole cause of the development of inebriety. In fact every case formerly was attributed to this practice. Under this view, the individual was looked upon as voluntarily entering upon a habit which was sure to bring upon him a drunkard's fate. This practice has consequently been denounced as criminal, and the drinker been subjected to the severest reprobation. The courts have held that the delirium of intoxication was no excuse for violence or crime of any kind, for the condition was brought on by the voluntary act of the individual himself.

It must be evident, however, that this practice is but the first manifestations of the morbid propensity, and is as much a part of metho-mania, as is the subsequent continuous or inveterate stage. The inclination to tipple, whenever occurring, should consequently be regarded with alarm, as indicating the approach of a most serious and grave disease. Measures to arrest its advance should at once be employed, as any sanitary precautions are taken to prevent the approach of yellow fever or cholera.

It is in this stage that recovery is most likely to take place, for the disease is then only in process of formation, and is more easily thrown off. The will then has not become weakened or overpowered, and the recuperative energies of the system have not been impaired.

In that form of inebriety which has been attributed to the influence of emotional disturbances, it may likewise be doubted whether these influences are the direct cause of the paroxysms; they only operate as exciting causes, and by their influence upon an organization already predisposed, weaken the power

of resistance, and give favorable opportunity for the development of the disease. We have all seen individuals drawn into the vortex and swept away under disturbances of the emotions and passions. And this is no more strange than that the same causes should in others, disorder the intellect, destroy its balance, and overwhelm its faculties; occurrences which I believe are not uncommon. Do not both these conditions equally claim our sympathy and benevolent exertions. Is one *wicked* while the other is properly regarded as *unfortunate*?

In all of these cases, both of metho-mania and insanity, we must recognize a previous predisposition to the attack. The fact that many undergo all these emotional disturbances and excitements without developing either drunkenness or derangement of mind, is conclusive that they alone are insufficient. There is a previous susceptibility to these attacks which must be regarded as unsound and morbid.

Of the effects of this disease upon the character of the individual and its influence upon the moral and affective faculties, without reference to any consequent organic lesions, or functional derangements, it may be remarked, that the tendency of the practice of drinking is to obscure and destroy all the higher and nobler impulses of human nature, and in prolonged cases, where the disease has wrought out its full effects, the subject of it may become completely debased and lost. Under every circumstance, the effects of alcoholic indulgence are dire enough, as we must all admit, yet I believe that we have been accustomed to regard the drunkard as lost too soon. He is not always, in fact, I believe that he will rarely be found to have become utterly abandoned. I do not believe that even in the worst cases of inebriety, that one's manhood is entirely obliterated. It is often completely overborne by the power of that terrible propensity to drink, so that no signs of its existence are put forth; but give it the opportunity, let an opening once be made in the prison house in which it is incarcerated, and the soul and the higher instincts of the man would spring forth once more, like a bird escaped from its cage, to enjoy again their freedom and a new life.

I do not believe that the affections and emotions of the mind are so completely debased as has been supposed. Under the influence of alcohol the affections are sometimes unduly excited, and the consequent demonstrations are really *silly*; in other instances, the brutal characteristics of the man are evolved and he becomes harsh and unkind. I do not regard such exhibitions of character, however, as transformations wrought by alcoholic poisoning, but rather as revelations of *real* character, made under the insensibility of intoxication. A man, who, under the influence of drunkenness, will be quarrelsome, revengeful or dishonest, will be the same when sober, provided that from any other cause he should become equally incautious. Under the influence of drink the intellect is overwhelmed, and the affections and perceptions are blunted and perverted; but remove the depressing cause, liberate all these faculties from this fearful influence, and they will rise again to their proper place, and will resume their wonted activity and sway.

This whole subject is one of engrossing interest. Upon the medical profession will devolve the duty of treating the subject in the light of true science, in the hope and belief that, as variola has been or can be rendered harmless by vaccination, so the proper employment of remedial measures may exterminate or at least make powerless for evil, the fearful scourge of inebriety.

THE CLASSIFICATION AND TREATMENT OF INEBRIATES.

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In all forms of hospital life, nothing is more desirable as a basis for discipline and treatment, than a judicious classification of inmates, and in no variety of experience does this seem more difficult to provide for, than in the congregated care of inebriates.

I think, none of us, who have given careful thought to the specialty we represent, can have failed to observe three classes of inebriates, each of which is capable of an extended and common subdivision, as follows:

First.—Professional debauchees, whose purposes in life seem to be limited to the gratification of appetites or passions; and who, yielding to such gratification, have not only become confirmed inebriates, but have fallen into other excesses of a more vicious character.

Second.—Those, who without a decided intention to do wrong, and without any abiding purpose to do right, are the victims of their own moral weakness, or of the cupidity or recklessness of others.

Third.—Those who are earnest in their desire to live soberly and righteously, and anxious to avail themselves of every means offered by others for their recovery; who are capable of estimating their danger, and possess the courage to confront, and antagonize it.

In addition to this limited classification, they may each be subdivided, according to nativity, constitutional tendencies, early education, domestic and social relations, physical complications, inherited moral qualities, age, &c., but for the purpose now in view I shall confine myself to the three general classes already enumerated.

CONFIRMED INEBRIATES.—I shall call the first class, *Confirmed Inebriates*. I prefer the word confirmed, to the more common term habitual, for the reason that one may be in the *habit* of occasional or frequent intoxication, and yet not be so far established in the habit as to warrant the application of the term, in its ordinary sense.

A person with a consumptive diathesis, may have the pathogenic signs of incipient tubercle, and yet not be confirmed in the disease, as in cases where softening and destruction of tissue have taken place. So, I suggest, it is with inebriates. They may be poisoned (intoxicated) by alcohol, occasionally, or frequently; or, the toxical impression may permeate the tissues, and thus establish or confirm the disease of alcoholism.

How to care for this class, more than any other, is the problem that the civilized world is now endeavoring to solve, and in which every household is immediately or remotely concerned.

Confirmed inebriates constitute a considerable class of the community; they are, as a rule, largely unproductive, and a necessary drain upon the resources of the people. What can be done for, or with them?

The first thought in this connection, involves the idea of custody and restraint, and this is always offensive to the intuitive love of freedom, which in this country especially, is the fountain impulse in every American breast. All our actions are influenced by this impulse, which is as native to our intellectual being, as the capacity to breathe is, to our physical nature.

Yet the safety of the victim's family, the security of his estate, the peace of society, and his own welfare, demand that his downward career must be arrested.

How far his personal liberty may be restrained to accomplish this end, is a delicate question; but perhaps there is no maxim more pertinent to the case, than that of John Stuart Mill, who, when discussing the liberty of the subject says: "As soon as the liberty of the subject interferes with the general interest of the community, the liberty of the subject must be forfeited."

The most democratic government will allow, that however sacred may be the rights of men individually, they are no more valuable to the individual, than the rights of a community are to those who constitute it.

A confirmed inebriate is one whose body is poisoned, and whose moral development is retarded.

He is incapable of doing what, in his best moments, his will prompts him to do, and hence, may be dangerous to his family, or neighbors, as well as to himself.

The interests of the community are thus interfered with, and it becomes the duty of the state to defend itself. Hence, penal enactments have been adopted, with a view of protecting community; but the error has been, as it seems to me, that society has overlooked the interest of the offending class. It deals

with them simply as criminals, and offers them no aid to a better life. I have before me, "Returns of constables of boroughs, and of head constables in England and Wales, in regard to habitual drunkards," which abundantly demonstrates that the penal management of inebriates is of no practical service to them, or no certain protection to society. The following extracts are offered :

In Leeds, "One woman was convicted seventy-seven times."

In Monmouth, the constable makes the following statement: "I have had nearly thirty years experience in police duties, and a great number of persons charged with drunkenness have passed under my notice, and I find that habitual drunkards, on being released from custody, prison, or on payment of a fine before justices in petty sessions, invariably resort to the public house, and commence drinking afresh."

In Rockdale, "Drunkards are going to jail by hundreds, weekly, and I question if such incarceration destroys, or even weakens the love for strong drink, however long the term of imprisonment. The first place visited by discharged prisoners is the dram shop."

In Tunbridge Wells, "One person has been convicted about thirty times."

In Truro, "One person has been convicted thirty-three times for drunkenness, and assaulting the police; has had nineteen Christmas dinners in the county prison, and has served upwards of eleven years in prison, all for drunken and riotous conduct."

In Warrington, "A great many of the 521 have been convicted in previous years; several as many as twenty or thirty times."

In Arbrourh, "We have seven persons here who are never more than four or five days out of prison at a time, through committing breaches of the peace while drunk."

In Glasgow, "19,968 persons were brought to the police office and discharged when sober. Many of the persons indicated under the above numbers may have been taken to the police office, twenty or more times, in the course of a year."

In Renfrew, "Out of forty-four committed, thirty-six persons forfeited pledges for drunkenness and disorderly conduct."

In McMouthshire, the chief constable says: "The definition of habitual drunkards will require alteration, otherwise, it appears to me, that in this county it would include nearly one-half of the male population of the cobblers and miners."

In Whitby, it is reported, that "Some of the foregoing have been committed as many as ten times for drunkenness."

In Liverpool, it is said by the chaplain to the borough jail: "Few have seen more than I have seen, and constantly witness, of the hopelessness of ordinary methods to reform an old drunkard. I have only this morning conversed with two women, both under forty years of age, who have been imprisoned, one fifty-seven, and the other forty-three times, for being drunk and disorderly. One of these has suffered twelve month's imprisonment as an incorrigible, the other one, five years in penal servitude; a third, who has been here thirty-four times, was committed on six consecutive Mondays for drunkenness."

In Devizes, the chaplain says: "The present system of sending drunkards to prison for seven days, is useless in either point of view. It is no punishment to those who are accustomed to it, and the time is not sufficient for reformation."

In Chester Castle, the chaplain says: "I have been eighteen years a prison chaplain, and during that time have known very many habitual drunkards, who should have found an asylum elsewhere than in a gaol, and to whom a judicious and less disgraceful restraint would have been a blessing."

We need not, however, go beyond our own country for proof, to convince us that fines and imprisonment, for a few hours or days are utterly useless, either as a means of recovery, or as a protection to society.

On the other hand the degradation and demoralization, which are the essential sequelæ of such a course, lessen the chances for the improvement of the individual, and increase the danger and expense of the community, by increasing the liability to offence and criminal prosecution.

Detention in asylums, or sanitariums, with appropriate work for body and mind, under prescription of medical officers, and a limited probationary trial before being finally discharged, would be the salvation of thousands of inebriates, and a source of economy to the state.

In many cases the detention might be permanent, and it could be made more or less productive by the laboring classes. None would be more ready to accept such an alternative, than those who are incurable and helpless, provided the odium and disgrace now attached to commitment and detention are

removed, and the appliances for improvement and culture take the form of hospital treatment in place of penal retribution. In confirmation of common observation in this country, I quote from the chief constable of Birmingham, England, as follows:

My Inspector Percy, reports that during nearly ten years' experience as keeper of the lock-up, he has had conversation with many prisoners who are being locked up for drunkenness, and upon his telling them that asylums would probably (at some time or other) be established for persons of their habits, several of them have expressed themselves both willing and desirous to enter any such establishment, for the purpose of redeeming their moral character.

This is abundantly confirmed in this country, by hundreds of such cases voluntarily seeking refuge in inebriate asylums.

Class number two will now be considered.

EMOTIONAL INEBRIATES.—Those, who without bad intentions or acute convictions of duty and responsibility, or established principles of right, give themselves to the promptings of impulse, and who I shall denominate *Emotional Inebriates*.

It is well known to physicians, that the sympathetic system of nerves, as well as some parts of the cerebro-spinal system, are not under the control of volition. It is well for mankind that it is so, or we could die, by willing to die; or do whatever else our caprices might command. It is a wonderful display of the Omniscience of the Creator, that He has guarded us against the fitful passions of our nature, by endowing the great sympathetic system with the independent control of vital functions, so that "we live, and move, and have our being," whether we will or not.

Emotion may disturb the processes of nutrition, and all the changes incident to the chemistry of life, while the *will* remains powerless and dismayed. Illustrations of this fact might be drawn from the various erratic displays of hysteria, and the strange effects of grief, joy, fear, &c., upon the visceral functions, but they need not be used before this Association.

We have all seen such cases, and our experience must have taught us, that the victims of emotional irregularity and excess,

are frequently the most wayward and difficult subjects we are called upon to treat.

The law does not assume to control or regulate by punishment, the protean hysterical disorders which are constantly exhibited in the domestic and social life of the people, for the simple reason that the source of relief is to be found in the faithful training and discipline of the visceral and emotional desires, with a view of adjusting and harmonizing their relations to each other, and securing a healthful equanimity between them.

The same constitutional conditions which induce hysteria in some cases, induce in others the desire for alcoholic stimulants, and the susceptibility to the poison in such is frequently acute. It would be as wise in the one case as in the other, to attempt restoration by fines and imprisonment. Removal from disturbing associations, to new and invigorating influences, restraining excessive development on the one hand, and stimulating feeble powers on the other, is the end to be sought in either case. It is equally true that in both, there may be symptoms of violence, as exhibited in hysterical mania, or in delirium tremens, when such restraint will be temporarily necessary, as cannot be judiciously had at home.

Nothing is more common to practitioners of medicine than to witness such cases in private practice.

What are popularly known as nervous diseases interfere with domestic happiness, and create discontent by their strange eccentricities, which seem, at times, to exhaust the patience and even the sympathy of the fondest friends. The subjects of such disorders are, at times, unfit for the enjoyments and amenities of the social circle, as they are disqualified in domestic life for its obligations and pleasures. They are frequently committed to asylums for the insane as the most available remedy, though they do not strictly belong to the category of insanity.

Inebriation is but another form of family sorrow and public annoyance; and as both conditions result from similar constitutional causes, and are alike distinguished by eccentric and

disturbing conduct, there seems to be no good reason why one should be the subject of scientific care, and the other of fine and incarceration. If no such reason exists, it is submitted that special institutions are the best remedy for the emotional form of inebriety, where the enfeebled forces may be strengthened by exercise, and the tendency to excess be suppressed, rather than restrained, by preventing as far as may be the occurrence of emotional excitants.

ACCIDENTAL INEBRIATES.—The third class will be named *Accidental Inebriates*. Such are men of good principles and character, who know and acknowledge their infirmity, and endeavor to overcome it.

Students, authors, and overworked business men furnish a considerable percentage of this class. Salesmen, also, of large mercantile houses, in the busy rivalry of trade and hospitable attentions to customers, are led into the practice of drinking without being conscious of their weakness, till they discover that they are enticed into inebriety, and know not how to escape. They are overcome by drink, as men are often overcome by eating immoderately.

The immorality of excess is not questioned in either case, though the results are very differently estimated by an unthinking public.

Colic, gastritis, apoplexy, death, may be the consequence of excessive eating; and intoxication with all its resulting dangers of excessive drinking. And why one should be treated as a disease, and the other punished as a crime, is among the anomalies of our civilization. If we would endeavor to study the conduct of men, in its relation to the common law which underlies and controls the vital processes, we would be more ready to see that an overworked brain, which reels from its balance into insanity, is alike responsible for the strain to which it has submitted itself, with another over-worked brain, which vainly seeks relief in the use of alcoholic stimulants, and finds at last, that while it avoids the one evil, it falls into another that is equally alarming.

We would see, also, that a stomach that is overworked by indigestible food, and demands more of the vital force than can be supplied, to enable it to perform its functions, is very much like a stomach that is goaded by alcohol, or enervated by constitutional taint, and that the reaction upon the whole organism through the nervous centres, is in both instances, similar in kind, though it may be different in expression.

These views are not presented in extenuation of the offence committed against nature by such indulgence, but for the purpose of attracting attention to facts which are common to the observation of physicians and all thinking persons, who give themselves to a thorough investigation of the subject.

I gather from my private notes of more than two hundred cases of alcoholic inebriation, the following important fact. Among them there is not a single instance of organic brain disease belonging to, or resulting from the use of alcoholic beverages, while a variety of diseases of the digestive and pulmonary organs, of the bladder and general nervous system, with a few minor surgical cases, resulting from exposure and accident, make up the record.

This has impressed me as worthy of note, in contrast with the commonly received opinion that a majority of cases of insanity result from excessive indulgence in intoxication, and that statements to this effect are currently made, to give inspiration to popular appeals on the subject.

Upon examining the records of several of our most important lunatic asylums, I find that they do not confirm the popular opinion.

The "Report of the Pennsylvania Hospital for the Insane, for 1870," presents the following facts: There have been treated in the hospital up to the date of the report, 5796 cases of insanity, only 446 of which are attributed to intemperance (a small number compared to the popular estimate of the relation of the diseases).

Among other causes, however, so far as ascertained and enumerated in the report, nearly all are attributed to influences, such as are constantly urged by inebriates and their friends, as

reasons for the use of intoxicants, namely: "loss of property," "intense study," "domestic difficulties," "political excitement," "intense application to business," "disappointed expectations," "want of employment," "use of quack medicines," "mental anxiety," &c., &c.

Who of us does not immediately recognize these as among the commonly reputed "causes" of the intemperance of those who seek the shelter of the institutions under our care?

If these records are true (and we have no more highly accredited authority in such matters than Dr. Kirkbride), their importance should have due weight in these investigations.

It may be further remarked, that as delirium tremens is not mentioned in the report, it is fair to suppose that many of the 446 cases attributed to intemperance, were victims of this disease, and not of insanity in the ordinary acceptance of the term; and it is to be regretted, that the distinction between the temporary or acute mania from drink and insanity proper, is not made in the report. The propriety of committing persons with delirium tremens to the custody of hospitals for the insane is not questioned; but we cannot avoid the fact that delirium from drink, occurring during a debauch, is analogous to delirium from fever, occurring during an illness; and the necessity for restraint is but temporary, the patient recovering without any permanent lesion of cerebral function or structure.

INSTITUTIONS.—We now come to consider institutions for inebriates.

Hitherto, there has been an unjust prejudice against them, growing out of the fact that inebriety is a public vice, subject to legal punishment, and also, that many leave the care of such institutions and relapse into their former habits; and when this is witnessed by friends and by the public, it is the occasion for unreasonable objection. If all the patients in hospitals for insane, who are incurable, were discharged after a few months trial, and returned to their families, appearing on the streets in a state of excitement, or wandering aimlessly in a cloud of dementia, there would be a public expression of dissatisfaction

that would react very injuriously upon the benevolent intentions and careful management of such institutions. As it is, the cured, or those who are much improved, only are discharged, while chronic, incurable cases are retained, and, of course, sheltered from public observation. Hence the necessity for an increase of accommodations for the insane. Old asylums are being enlarged, and new ones erected, at great public expense, not so much because insanity is on the increase, as for the reason, that in its chronic form it is so largely incurable, and that the guarded life of the hospital insane promotes their longevity, thus increasing the demand for seclusion and restraint.

The public would pronounce inebriate asylums already a great success, if the cured cases only were discharged, and while there is no legal provision for the detention of the confirmed class, we shall conduct our work under disadvantage.

The public would be content with an occasional relapse even, but when the unreclaimed mingle with the world again, and continue their former practices, asylums for inebriates are regarded by many as inefficient.

This is unreasonable and unjust. People do not stop to consider that a variable percentage of incurables marks the history of all diseases, even under the most skilful management; or that very few—too few to be named—of criminals in jails and penitentiaries are reformed. If this fact was observed, and the people would carefully compare the published records of all institutions for the cure of disease, and for the punishment of offenders, with the statistics of asylums for inebriates, they would discover that the figures afford a very favorable and encouraging view of such institutions.

Whether our institutions are large or small, public or private, seems to me of but little importance, provided the means for classification and distinctive treatment are supplied.

What these means should be is an important question.

We have denominated three classes—confirmed, emotional, and accidental inebriates. It is fair to assume that a large proportion of the first class are beyond the reach of complete

recovery, and that they need constant care and supervision in institutions, which should be empowered to restrain and control when necessary.

The second, or emotional class, require rather an educational process, the end of which, as already stated, should be to equalize a disproportionate system, and secure stability of character.

The third, or accidental class, furnishes a large percentage of cures, and should be provided with institution accommodations that are suitable for thoughtful and serious men.

With such men, convictions mean something; sorrow is real; effort is earnest; and a quiet persistent struggle with self and temptation, is a warfare that must be sustained by associations of an elevated and invigorating character.

Can these different classes be judiciously treated in the same institution? The answer is, Yes!

My own judgment is, however, that they should occupy different buildings, or if the building is large, be placed in distinct sections. The first or confirmed class should be placed in a hospital building with arrangements for restraint, which, while it would be advantageous for them, would have a deterrent influence upon others, strengthening them to avoid all risk of being transferred from their more free surroundings to hospital discipline. It should be a receiving hospital as well, into which all new cases should be placed on arrival, especially if intoxicated, and detained until a proper time to remove them to another department.

Each individual would thus become familiar in a short time with hospital life, and on improvement, being removed to more agreeable quarters, would use every effort to avoid a return, which should be the inevitable consequence of a relapse. We see the same principle in ordinary hospitals, where fever patients, for example, are removed from the sick to the convalescent wards, subject of course to return, if there happens a recurrence of the disease. The other two classes could mingle without interference under proper discipline.

Another objection to these institutions is, that so few can be accommodated, in proportion to the whole number needing care,

and that the public evil cannot be effectually remedied by such means. The same objection may be employed against institutions for any class of helpless and dependent people. And yet each state has its jails, almshouses and hospitals in which convicts, paupers and invalids are retained. Why not have district asylums and reformatories for inebriates?

The people are so familiar with both public and private intoxication, and so embarrassed by the monopoly of the traffic in intoxicating beverages, which is created and sustained as a source of revenue to the state, that they are appalled with the magnitude of the evil, and hesitate to combat it with any confidence of success. Our institutions, however, have accomplished much, and are gradually tending to higher and more reliable results. The best and greatest things come little by little. Science is unobtrusive but omnipotent. It comes in the wake of revelation, and gathers its inspiration from the same Source of all truth.

We deal with individual men, representatives of a multitude in the world, who like themselves are sad and wayward victims of an evil that sweeps away the foundations of moral and political security. In learning to deal successfully with such individual men, we learn to deal in like manner with the multitudes they represent; and here is the great use of our institutions.

An institution should be a miniature community, in which the classification of inebriates should be made to represent as far as possible what is needed in general society. For incurables, or incorrigibles, or whatever else they may be called, a place of detention; and for other classes, such care and treatment as may tend to their recovery.

If society would establish within given districts according to the population, asylums where the confirmed class should be kept under judicious restraint, they would, in my judgment, react most favorably upon all other classes of drinking men, to urge them to the use of every available means to avoid in themselves, the alternative of commitment and detention.

These institutions should not be large but numerous; they should be brought as near to the people as possible, that the

people may feel them to be, what they really would be, an abiding reproof and warning.

In addition, there should be homes or hospitals for the curable, which would be sought for and patronized by a large class of earnest and anxious persons. State economy would thus be insured, and public health and morals improved. If crime and disease are as largely the result of intemperance as is generally believed, it is evident that it is cheaper to detain the confirmed inebriate, that he may not be in a position to become a criminal, and to treat the better class in hospitals, where they may have opportunity to recover and become productive, with less risk of being burdensome to society and of continuing a diseased posterity.

Statistics seem to prove that crime and intemperance are concomitants of each other, and affect both the social and physical welfare of the people to an extent of which we have yet but an imperfect view. It cannot, therefore, be otherwise than safe and economical in the state, to prevent the crime by detaining the confirmed inebriate under proper restraint, and curing the milder form of the disease in suitable and properly endowed institutions, that the effects of this terrible companionship may be modified in this, and largely prevented in the next generation.

The existence of such institutions would afford opportunity of studying the subject of inebriety, as it can be studied in no other way; and they would be instrumental in diminishing the demand for alcoholic and other narcotics, while public sentiment would of necessity become more enlightened, and results could thus be secured which would do much to instruct the legislation of the country.

As such institutions are multiplied and sustained by judicious legal authority, the public sentiment of the civilized world will approve and foster them. Light is needed as to the nature of the alcoholic poison, and its wonderful power of arresting and destroying vitality; and we should be encouraged to continue to accumulate and disseminate light concerning this obscure and disastrous evil, and the means for its treatment.

Light is gentle and penetrating. It makes no noise. It is the emblem of purity and truth. There is that in man which seeks and enjoys it, and while it is not our function to antagonize honest efforts from any source to do good in this cause, it is our duty to investigate patiently, to study industriously, and to scatter freely whatever we may discover.

Society owes much to the inebriate. It recognizes intoxicating beverages as legitimate articles of commerce. Government derives large revenues from their sale, and the law creates a monopoly of the traffic under a license system, which is more potential for evil than any other adjunct of the government. Society is instrumental, by its defective sentiment and practice on this subject, in creating most of the disability under which the inebriate struggles. It takes from him his property, and in some instances destroys his citizenship, enters the domain of his domestic life, blights the source of family happiness and social prosperity, and then fines him for doing what it entices him to do, and imprisons him for violating law, which entraps his weak virtue, and makes him a victim to the cupidity of the state. To no other class does it mete out such singular inducements to evil, and to no other class does it award such unreasonable and offensive punishment.

It may be said that the fault is not in the law or in public opinion, but in the individual. This is true in a large sense, but the fact must be borne in mind, that among the results of our abnormal civilization, is a generation of people with unusual susceptibilities to evil influences, and that as a consequence they seek abnormal means for supplying the intense demand that is made upon them, under such a system. Hence the necessity for a jurisprudence that shall recognize the source of the evil and provide for the protection of those who are weak in will, in judgment, or in moral sense.

The people are beginning however, to appreciate this fact, and we trust the time is not far distant when the punishment of inebriates will be displaced by a more enlightened and humane view of human infirmity. Society is already suffering the retribution due to its delinquency in this regard. The

havoc that the records of crime and intemperance abundantly verify, is, to a great extent, the legitimate fruit of our faulty jurisprudence and uncultivated sentiment. The ignorance and cupidity of the past, is yielding a full harvest of domestic sorrow and social disorder for the present.

Let us profit by these facts and experiences, and make them serviceable for the development of a better future.

WHAT SCIENCE AND THE INEBRIATE ASYLUMS HAVE TAUGHT US.

BY WILLARD PARKER, M.D., PRESIDENT OF NEW YORK STATE INEBRIATE ASYLUM.

It is scarcely more than seventy years since in this country insanity began to be regarded as a disease, and provision began to be made for its treatment. Every step was an experiment, many of the appliances were imperfect, and from the want of knowledge apparently cruel.

It is otherwise now. Since the days of Pinel, many of the best minds in the medical profession have been engaged in the study of mental disease. Asylums have been established, and have served as schools for scientific observation, as well as retreats for the management and restoration of the patient.

The result has been most satisfactory. It is now known that from seventy to eighty per cent. of cases of *acute mania*, such as are placed under scientific treatment within a year or less from the time of attack, recover, and are thus restored to their friends and to their place in the world.

In the last half of the nineteenth century, the attention of the medical profession has been directed to the inebriate: it has sought to determine his true status, to decide whether he be a moral delinquent, or the subject of disease, or both, and if his case, like insanity, be curable.

In order to answer the above questions, nine or ten institutions or asylums, public and private, have been established in five of the States, and for the last thirteen years the case of the

inebriate has been studied with scientific care. As it was with the insane, so now is it with the inebriate; the asylum is the school in which knowledge is to be acquired, for the enlightenment of the medical profession, the information of the public mind, and for the guidance to a better system of legal enactment upon the subject.

With these results—

Firstly, the nature of alcohol has been examined, in order to determine its true character; and

Secondly, its influences upon the animal economy have been studied.

What then is alcohol? Is it food?

It has been regarded as a kind of food by some chemists and practitioners, but their opinions have been theoretical and not borne out by facts. It was claimed to be a kind of respiratory food and that its use was to develop more animal heat, consequently eliminating more carbonic acid. This conclusion is not sustained by observation and experiment.

Food is that which repairs some waste of the system. We can repair that only which exists. Now in the human system there are water, fat, starch and sugar, nitrogenous substances. Iron, sulphur, phosphorus, animal quinine, as claimed by Bence Jones, sodium, potassium, chlorine, &c.; but no alcohol is found. It has no analogue in the system, hence there is nothing which it can repair, and it cannot therefore be ranked as food of any kind, but is out and out a *foreign substance*.

Is alcohol a poison?

I reply yes, it answers to the description of poison. It possesses an inherent deleterious property which, when introduced into the system, destroys life, and it has its place with arsenic, belladonna, prussic acid, opium, &c. Like these it is to be employed as a medicine, and has its true position in works on *Materia Medica*. It is therefore both a poison and a medicine. In this last capacity it has, like opium or arsenic, its definite characteristics, and in some cases, as a medicine, it is indispensable.

But has it no place at the table or in our bills of fare, either in distilled or fermented liquors?

In certain cases these are useful, but it is when they are used by the feeble or the aged, and then they should be taken as condiments and only *with* the food, and in such measure as not to be felt beyond the stomach. In small quantities, wines, &c., *stimulate*, and if not enough be taken to coagulate the pepsin and the albumen in the food, they in proper cases promote digestion and thus help to repair the system. But whenever more is taken into the stomach with the food, than is demanded, it passes into the circulation, disturbs the action of the heart, flushes the face and confuses the brain. When so much fermented or distilled liquor is taken into the system that the functions of the organism are disturbed, then positive harm has been produced; in one word the system has been so far *poisoned*. An irritation has been set up in place of the desired healthful stimulation of the stomach.

Toxicologists divide poisons into three classes: Irritants, Narcotics and Narcotico-Irritants. Alcohol belongs to the latter class. In its effects upon the living system it is first an irritant, and afterward when it has entered the circulation it becomes a narcotic. Were alcohol an irritant only, a man would as soon poison himself with arsenic or aquafortis. The narcotic element is the siren that leads him on to ruin and to death.

There are appetites implanted in the system, and when wisely managed they help to keep the system in a healthful condition. They express themselves in hunger and thirst, while the *cravings* of the system for alcohol, opium, haschish, &c., are the result of disease in the organism, more or less marked, depending upon the gravity of the lesion of nerve and tissue. The condition of the inebriate is abnormal; he is in a state of unrest throughout the whole system, and the urgency for relief is so great that the will has not the power to resist. What is denominated appetite, therefore, is a state of suffering dependent upon disease, as in colic or pleurisy, and the craving and demand for relief are beyond the power of the will.

These, then, are the effects of alcohol, beyond the point where it is useful:—

First, to induce a diseased condition of the nerves, which is manifested by the general symptom, depraved appetite.

In the second place, entering the circulation unchanged, it impairs the vitality of the blood. Careful examinations of the blood have been made, in order to determine what becomes of alcohol when taken into the system. When more is taken than can be employed as a condiment or tonic, it passes into the blood and circulates in all parts of the body, deranging the action of the heart and capillaries, confusing the brain and impairing the vital force.

It has been settled also by science that alcohol undergoes no change in the blood, but that it exists there as a foreign substance, like a mote in the eye. And what is denominated stimulation is irritation, and the excitement caused by the effort to throw off the irritating substance wastes the energy and life of the system.

After alcohol has produced disease of the stomach, and the depraved appetite, it next expends its force upon the neighboring organs, inducing disease of the liver, and dropsy or Bright's disease, both of which are fatal to health if not to life. The brain also, although farther from the stomach, is often diseased in function, and at a later period, in structure.

There are those who boast of the amount they can drink, if the spirit only be *pure*, without suffering from inebriation. Such persons do not understand that alcohol, however pure, is in itself a poison, and that they are in much greater danger than those who complain that when they drink, it "flies to the head." This last class are more likely to be restrained from the indulgence, when the consequences may be so serious or disgraceful.

Not only do special organs become involved through the effects of the poison, but the whole living organism is impaired and life is cut short.

It has been demonstrated on all sides, at the forge, in the workshop, in the field, on the march, in the Arctic region and in the Torrid zone, in physical and in intellectual labor, that the spirit drinker fails to cope with the temperate man.

We have said above, that life is cut short. This is proved by referring to the statistics of life insurance companies. They have ascertained that the temperate or the non-users of alcohol in any form furnish the safest risks. For instance, in a given number of risks extending in age from twenty to thirty years, where in a given time ten would fall in, if they were drinkers fifty-one would fall in.

Again it has been ascertained that a young man at twenty, who is strictly temperate, has before him as his average of life, forty-four years and two months. On the other hand, the young man of the same age who poisons his system by drink, can look for an average of life, of only fifteen years and six months.

The influence of alcohol on the masses is seen in the fact that it fits them to become the prey of epidemics; the constitution cannot resist the poison of cholera, fevers, &c.

Lastly, in referring to the influence of alcohol, we must not omit to speak of the condition of the offspring of the inebriate. The inheritance is a sad one; a tendency to the disease of the parent is induced, as strong if not stronger, than that of consumption, cancer or gout. And with this tendency he must wage perpetual war or he becomes a drunkard.

The tendency referred to has its origin in the nervous system. The unfortunate children of the inebriate come into the world with a defective organization of the nerves, which ranges from the inherited tendency, through all grades, to idiocy. In the Institution for the treatment of Idiots, near Boston, Dr. Howe reports that of the three hundred under his care, one hundred and forty-three are the children of drunken parents.

Such are some of the effects of alcohol upon man.

We have stated that the inebriate asylum is a school in which drunkenness is studied and treated. It is now proved to be a disease and to be curable. We have learned that there are different classes of patients, whose condition varies like their family history.

There is one class composed of those who had healthy and temperate parents, and who have had the advantages of edu-

cation. They have commenced drinking socially, and have indulged more and more frequently, until disease, as manifested by the depraved appetite, is established in the system.

This class incurred guilt, or in other words sinned in the beginning, by violating the laws of the system, just as the over-eater sins against his stomach and suffers from dyspepsia; or the over-worker sins against his brain and induces paralysis or insanity.

A large proportion of this class can be cured at an asylum, and the time required for that cure will depend upon the duration of the disease and the amount of organic lesion which exists.

The second class is made up of those who are descended from a drinking stock. They have inherited a tendency or predisposition; have less guilt to answer for than the first class; are less curable, or if apparently cured are more in danger of relapse. With this class an irresistible craving occurs in paroxysms, and if they can be shielded for the time from the means of indulgence, they are safe until the occurrence of another paroxysm.

There are nations or large communities with whom this fearful tendency to drink is an inheritance, as we have seen, to the perversion of their whole character.

The third class is composed mostly of young persons who are depraved in all their instincts, and who do not desire either reformation or improvement. They are not subjects for the ordinary asylum, and in time, wise legislation will cause provision to be made for them, that the community may be protected against their irresponsibility and lawlessness.

The Asylum at Binghampton has received 360 patients for treatment, during the eighteen months from May 1, 1870, to November 1, 1871. Of these, 42 were the children of intemperate parents. On inquiring why so small a proportion were the victims of inherited disease, it was answered, that a very large number of those whose parents were intemperate, were to be found in the insane asylums, in penal and in charitable institutions.

Of the 360, 228 were of that restless temperament called nervous, and 306 had become drunkards on whiskey.

Asylums have taught us that inebriety is curable; that the depraved appetite is overcome, as the diseased condition on which it depends is removed, and in many cases the cure is radical and permanent.

When this whole subject shall be better understood, it will be a wise provision, that the children in our schools be taught the character of alcohol and kindred poisons, that they may learn the dangers of indulgence and the wisdom of resisting the first temptation, as their only sure protection.

Thus in time would grow up a public sentiment which would banish from common use this worst of all scourges of the human race.

EXPERIENCES OF WASHINGTONIAN HOME, AT BOSTON.

BY W. C. LAWRENCE, SUPT.

Within the last forty years the world has been flooded with statistics embracing arithmetical calculations, personal investigations and general observations, all tending to prove and succeeding in demonstrating the alarming prevalence of intemperance, and showing conclusively its demoralizing and fatal effects upon society at large as well as upon individuals. The existence and magnitude of the evil being generally allowed, the attention of philanthropists and reformers is now engaged in devising means for its remedy and cure. One party believing in the potency of law, throws its influence in the direction of legal enactments and vigorously assails the aiders and abettors of intemperance—rumsellers and manufacturers—while the poor victims are left to totter on helplessly to their destruction, with perhaps an occasional warning or advice, which however well meant seldom results in any very perceptible good effect. Another class rely more on moral influences, and by exhortation, persuasion and invitation, through public meetings, the

pulpit and the press, strive to turn back or arrest the tide that is constantly and remorselessly sweeping its helpless victims to the prison, the poor-house and the grave. Against these favorable influences are opposed innumerable dram-shops, the alluring customs of fashionable society, and the infectious example of moderate indulgence, so apparently harmless and so thoroughly endorsed by influential respectability. The moral and legal suasionists, as such, are doing much and lasting good in their several lines of duty, but while they pity the victim of intemperance, sympathize with him in his sufferings, and labor assiduously to turn him from his course and to close the avenues from whence his malady is fed, they offer no corn for his food, no oil for his wounds, have no beast to bear him away from his temptation, nor inn where he can find temporary rest and refreshment. It remained for the originators and supporters of the system that gave birth to the especial Inebriate Asylums, to fully carry out the divine lesson given to humanity by the good Samaritan.

No man is so thoroughly robbed as the inebriate, none so grievously wounded. His money is the least of his losses, his blood the most trifling of his sacrifices. The ever-watchful and rapacious thief that goes through him, not only cleans his pockets, but robs him of his good name, destroys his business, snaps in twain his family ties, hardens his heart, sears his conscience, beclouds and maddens his brain, ruins his health, and if not arrested by the interposing hand of charity, pushes him to a dishonored and untimely grave.

On this vast and turbulent tide of intemperance, which, like a swiftly-rushing river is sweeping countless thousands into the ocean of eternity, there seems to be no breakwater, no life-boat, no inn upon the beach, where a repentant, struggling, drowning soul may find a refuge or an open way of escape, save here and there an inebriate asylum. Warnings he may have from either shore, entreaties may be showered upon him, and threats and imprecations hurled at his head, but his resolution is too weak and his appetite too strong to enable him to heed the one or fear the other. I am referring now to the repentant inebriate,

who sincerely and devoutly desires reformation and who only lacks proper opportunity to make an effectual attempt in that direction. All inebriates do not wish to reform. A great majority are too much infatuated with the delirious excitement of intoxication to desire a change in their daily habits. Absolute drunkenness they would avoid if they could, at any price short of total abstinence, but this they will not consent to pay, until, peradventure, broken health and reduced circumstances compels, what appears to them to be, the exorbitant sacrifice. The reformation of such men is at best only ephemeral, and restoration to health and a replenished treasury invites a return to old habits, which ends in deeper prostration, and thus they go on sinning and repenting, reforming and backsliding, until death relieves them from further suffering and struggling, so far as this world is concerned.

That this class may be more or less benefited by treatment in an inebriate asylum is not to be denied, but not in a degree commensurate with the means applied, or fully up to the intent of a thorough reformatory institution. There is a wide difference between reformation and restraint. The former enables a man to rise above all temptation. The latter gives him but a limited power of resistance. It is conceded by all, I believe, that asylums are needed where wholesome treatment may exert what beneficial influence it may, even in restraining inebriates, while at the same time every available inducement may be held out for permanent reformation.

Since the last meeting of this Association I have had another year of experience, during which time I have more carefully than ever noted events connected with the character and history of patients who have been treated at the Washingtonian Home, and I am more than ever convinced that an inebriate asylum, based on principles of entire reformation, should admit only such persons for treatment as manifest a reasonable desire to reform, and have some rational idea of their purpose when they seek admission. I speak of what such asylums should be, not of what they are. We have taken at the Washingtonian Home and shall probably continue to take for the present, patients in

every stage of intoxication, and even when crazed with the phantasies of delirium tremens, and shall continue as we have done to use our best endeavors to improve their moral, mental and physical condition; but with such cases experience teaches us that temporary relief is all we can expect in return for our best efforts. During all my experience I cannot recollect a single case where a patient has been brought into the institution in an insensible condition of drunkenness or when suffering from delirium tremens, that has been permanently reformed. They have all left the institution in good bodily health, and have been fully informed of the dangerous trials they had passed through and warned solemnly and repeatedly of the danger of a relapse into old habits.

But invariably, so far as my knowledge extends, these men have gone back to their former habits of drinking, and many of them found refuge at last only in a sudden and violent death. The reason of this result is obvious. The hearts of these men were not in the work. They needed help in their hour of need and received it; they were drunken and delirious and were made sober and sane, and thus ended the matter. They received only what they or their friends bargained for. A friend be he ever so near and dear cannot bargain for another's reformation from drunkenness, any more than he can for a sinner's entrance into the kingdom of heaven. Salvation from sin in general or from intemperance in particular, can only be safely sought and surely won by application of the sufferer himself.

I hope to see the day when inebriates of every grade and description will be kindly and tenderly dealt with in distinct asylums adapted to the peculiar needs of the several applicants, but before we get all we want, society must know exactly what is needed. Perhaps some of my medical friends will disagree with me when I say, I have no faith whatever in specific medicines of any kind, quality or quantity as an *absolute* cure for intemperance. We have demonstrated in our own practice the efficacy of medicine in removing or curing the effects of intoxication. During the past three and one half years we have treated more than one thousand patients of all kinds and con-

ditions of mind and body, varying in age from nineteen years to three score years and ten, including sufferers from heart, brain and lung diseases and other serious ailments, all aggravated by excesses, privations and exposures, and nearly one hundred of them raving with delirium tremens, and yet not a single death has occurred among them, and every one has been discharged with a clean bill of health, with the exception of not more than five, who were afflicted with organic ailments, which it was not our province to treat had we been able to do so. It is but just for me to say in this connection that the institution is much indebted for its healthful record and freedom from fatal issues, to the skill and care of our physician, Dr. John A. Fallette, who is always summoned whenever dangerous symptoms are observed in any of the patients.

I am inclined to believe that intemperance is a disease of the mind rather than of the body. So far as my experience goes, the most inveterate drunkards have started with the most healthful and robust bodies, and this favored physical condition is often sustained for years, in spite of repeated and prolonged excess. Such may drink to stupefaction and helplessness, and apparently lie exhausted on the brink of dissolution, but let them stop drinking, and a little medicine or no medicine will fix them all right in a very short time, and in a few days of rest, with nutritious feeding, they will be sufficiently recuperated to enter upon another debauch of three or six months' duration.

That our institution is much indebted to the judicious use of proper medicines for its clean bill of health, I cheerfully and believingly acknowledge, but that any or all the medical preparations we have used, have alone had the effect in the reformation of our patients, I do not believe. When we have restored health to the body of the patient, our work at best is only begun. To successfully administer to a diseased mind and to restore it to a healthy condition is not the labor of a day or a week, but requires months and sometimes years of moral effort.

The Washingtonian Home, in admitting and treating patients has exhibited a degree of leniency that has no doubt militated

against its success as a reformatory institution. They have been taken sensible and insensible, with and without their willing consent, and have been allowed to stay a day, a week or as many weeks as they or their friends have desired. In very many cases a few days sufficed to restore physical health, and the patients would leave, without giving us an opportunity to try our remedies for the "mind diseased," and if in a few weeks or months they fell into their old habits again, the home treatment was pronounced a failure in their case at least. Nearly all the cases of thorough reformation that have come under my observation, are from among that class of inebriates, who honestly and devoutly wished to reform, and whose stay in the institution extended from four or five weeks to as many months. It requires much time and many efforts to effectually reach the diseased mind of the inebriate. It is a common saying that any man can reform his habits if he has a mind to. True; but how is it if he has not a mind to? Any man can lift an anchor weighing a thousand pounds if he has the strength to do it. But suppose he has not the strength? Dr. Winship and Dr. Dio Lewis, who are men of muscle and know how to develop it, will take the weak man in hand, and by daily practice enable him to gradually but surely, develop his muscular powers, until he shall be able to lift the anchor from the floor with both doctors on it. So will we take the patient of weak mind and powerless will, and by daily efforts so develop and energize his will and strength, and illuminate his mind, that he may be placed up to his chin in whiskey and not be tempted to wet his lips with it. This is no fancy sketch or flight of the imagination. I can prove this to be almost literally true in the case of very many living witnesses. It may be said what can a man learn in a month, that he cannot learn in a week? I answer, that it is not so much what he learns as it is how deep and thorough he learns it. Some men forget to-day what they learned yesterday. Others remember for a life time what they learn in a moment. Let us suppose a poor, diseased inebriate, sick, sore and sorry, coming to our asylum with an honest intention of reform. A few days, perhaps a

week suffices to restore him to good bodily health. He eats well, sleeps well, and feels well. He thinks he may as well go home. We say to him, stay, you have learned nothing yet material to your *cure*. You have got over a dozen or a hundred just such sprees before, but was not prevented from going on another. You say you never intend to drink again. You have said the same thing many times before. You have promised parents, wife, children and friends, many and many a time, that you would never drink again, and in every instance you have broken your promise. Now we want you to stay here until you are able with God's help, our help and your own strong will, to make a promise that you never will break. He consents to stay, then he begins to think and to observe. He finds himself identified with a score or more of others, more or less like himself. They are all with one accord in one place, for one purpose, and that purpose is to develop the latent strength that lies buried in their feeble minds until they shall be able to go out into the world and say no! to their old foe when he shall tempt them. He finds himself bound by a nicer sense of honor than he has ever felt before. He is not going to be the only black sheep in the flock. If they can keep sober he can. He is freely allowed to go out when and whither he chooses. He passes familiar dramshops and meets old associates. The temptation to drink is met by the thought that he has got to face his fellow patients at the next meal. He is afraid to drink even if he desires it. He cannot deceive them, they are old heads and can smell the bottle afar off. He does not drink, and meets his mates at table with a bright eye, a sweet breath, and a clear conscience. The first battle has been won, and every succeeding one will be more easily gained. By and by he sees another victim come in, battered, bruised and torn. He looks on him with pity not unmixed with disgust. He wonders if he ever looked like that, and when told that he was quite as bad, and perhaps worse when he entered, he shudders and inwardly vows never to lay himself liable to look like that again. From day to day others come in, and again and again he renews his vows. When they begin to recover he imperceptibly and perhaps undesignedly becomes the

good Samaritan and sympathizes with them, and begins to cheer them up and even to advise them. He tells them how bad he has been, how good he is going to be, and how long he has been sober. Here comes another cord of strength to his will. How can he go out and drink and set a bad example to these poor fellows? He says I will not drink, and he does not. Next he attends the meetings in the chapel. He hears the recital of men once as bad or worse than himself, who graduated one, two, five and ten years ago, now looking so respectable and gentlemanly in appearance, that it is hard to believe they were ever drunkards. He is at length persuaded to rise and speak himself, and be his maiden speech ever so feeble, he feels much better for its deliverance. He has now learned to hoist his colors, and if he follows directions, in a short time he becomes a sort of missionary among his friends and acquaintances. Now a daily routine of this kind, together with frequent arguments and conversations with his fellow patients, works so favorably upon his mind that he finds himself strong enough for any and every temptation. And this is his cure. It does not come from the outside. It is himself drawn out. It is the inner man brought to the surface. It is the man's heel set upon the serpent's head, that is all.

And here let me say, that the reformed man who does not labor more or less to reform others, and who does not identify himself more or less with some temperance society, is in great danger of falling. The battle against the foe is a life struggle, and the weapons of warfare should not be laid down, until death relieves the soldier from his armor.

Finally, it is my firm conviction, that it is the man himself that saves himself. If he is honest and improves the opportunities that philanthropy offers, experience suggests, and God appoints, he will succeed. If he is not heartily willing to put his own shoulder to the wheel, and to work out his own salvation, by the sweat of his own brow, accepting with gratitude such aids as are proffered him, and repaying in kind to others in like circumstances of need, all the legislation, all the preaching, and all the medicine in the world, will afford him only temporary relief, but will never effect his permanent cure.

HYDRATE OF CHLORAL IN DELIRIUM TREMENS.

BY J. A. FALLETTE, M.D., PHYSICIAN TO WASHINGTONIAN HOME, BOSTON, MASS.

Having, from the first introduction of hydrate of chloral, put it to the test in the treatment of delirium tremens, and having, within the last year, treated more than sixty cases of it, with a success most flattering, I wish to give our mode of treatment and its results. Without any theory of its action that I desire to put forward, I wish to state simply the results which we have been able to obtain, at the same time giving the notes of the very few cases in which its effects were other than we could wish.

The treatment has been conducted on the belief that sleep and food together with healthy digestion, were the first necessities: that in the total deprivation of alcoholic stimulants some other stimulant must supply its place.

For stimulants we have relied on beef tea and the oleo-resinous extract of capsicum, 2 grs. pill. When the patient has not fully developed delirium tremens he is treated usually with the capsicum pill and 50 grs. of bromide of potash, repeated once in three hours; with this and beef tea they will often rally at once.

The quicker, and, so far as I have observed, the better and equally safe way is to commence the use of chloral at once, when the patient is in a state of excitement and watchfulness. In a large number of cases in which it has been used, we have never met with but one in which there could be a question as to its good effects, and in that the result was good. See Case V., p. 92.

It leaves no bad effect upon the digestive organs, but rather a good effect, for within twenty-four hours after its use the patient usually regains his appetite and power to retain his food.

The effect on the pulse is to reduce its frequency, by the time sleep is produced, from 10 to 30 pulsations per minute. In one case, in which the pulsations were but 40 per minute, they increased under the use of chloral to 65. Case VII.

In one case only have I seen it raise the pulse to any amount: Case V. This was complicated with intermittent fever. The amount usually required to produce sleep is 120 grains, some will go to sleep with 50 grains. I have given 270 grains in three hours: Case IV.

The first dose given is 30 to 60 grains, and 30 grains repeated every fifteen minutes, till sleep is produced. The sleep lasts about three hours, sometimes ten or twelve. If, on awakening, the patient is delirious, he is given beef tea, and if he does not sleep again within an hour, 30 grains of chloral are given and repeated as before, every fifteen minutes, till sleep is produced. In three cases the patient, after having taken 100 grains, has become staggering drunk to all appearance; all the other cases yielded as if passing away to a natural sleep, occasionally with slight stertorous breathing. The recovery is rapid: after about twelve hours of sleep the patient wakes, with all his faculties natural; in twenty-four hours he is well, as regards delirium, but is more or less weak, as the result of the debauch; after this he receives no more treatment, other than enough to eat.

When the patient cannot retain chloral on the stomach morph. sulph. gr. $\frac{1}{4}$, is ordered once an hour, with small pieces of ice.

Below are the notes of some of the troublesome cases:

CASE I.—Mr. H—, age forty-one, apparently of good constitution; had been drinking hard six weeks; came to the Home May 20th, feeble, delirious, with nausea; could not take bromide, pills, or beef tea; vomiting all night. Saw him on the 21st, 9 A. M., found him as above; pulse 115, weak; ordered morph. sulph. gr. $\frac{1}{4}$ every hour, for three hours. 1.25 P. M., gave 30 grains chloral; 1.40, 30 grains; 1.55, 30 grains, slept two hours; 4.15, 20 grains, lay very quiet, but saw strange things. 11 P. M., 20 grains; 11.15, 20 grains; 11.30, 20 grains, pulse, 100. Slept all night, in the morning rational, nausea gone, gave beef tea. No more treatment, not confined to room. Number of grains given, 180.

CASE II.—Mr. L——, age thirty-six. Came Oct. 6th, 9 A. M. Was given pill capsici and bromide of potash; much nausea and vomiting; was given morph. sulph. gr. $\frac{1}{4}$. Saw him Oct. 7th in morning, found him delirious, pulse 110. Ordered chloral 40 grains, 8.45 A. M.; at 9 o'clock, 20 grains, slept short time, pulse 100; 11.30 gave 20 grains, slept four hours, woke delirious; 8 P. M., 30 grains, pulse 110, delirious all night. Oct. 4th, 9 A. M., pulse 110, firm. Ordered chloral 40 grains; 9.15, 40 grains; 9.30, 40 grains. Went to sleep 10 o'clock, slept most of time till next day, then all night. Number grains given, 300.

CASE III.—Mr. G——, age forty-eight. Saw him 10 A. M., found him weak and delirious, pulse 100, ordered 10.15 A. M., 30 grains; 10.30, 30 grains, slept four hours, woke as bad as before; gave 15 grains, and repeated twice, slept ten hours, woke rational, but weak. Recovery so rapid that he was drunk again in a week. Number grains given, 105.

CASE IV.—Mr. W——, age forty-eight, liquor dealer. Nov. 11th, very delirious, and in great imaginary trouble, pulse 108, weak. 7 P. M., ordered chloral 30 grains, was quiet, repeated in fifteen minutes, grew noisy, pulse stronger, and 100. From this time on he was given 30 grains every fifteen minutes, with an interval of forty-five minutes to get a new supply of chloral. He seemed more and more drunk up to the time of going to sleep, 10 o'clock P. M. In this time he had taken 270 grains of chloral. The pulse remained firm and steady, the breathing was easy and regular. No stertorous breathing. Next morning, up and dressed, rational and hungry, was out of doors the following day.

CASE V.—Mr. F——, age thirty-six. Nov. 22d, came in the morning, was given pill of capsicum. 10 o'clock had a chill, which he had imported from Louisiana. After chill was over, pulse 105, ordered chloral 30 grains, repeated 30 grains, pulse 140, feeble, irregular; gave no more till afternoon; 4 P. M., pulse 110, 30 grains; 4.15, 30 grains, pulse 145, rapid, irregular, sound of heart very feeble, muttering delirium. 7 P. M., pulse stronger, 110, still muttering delirium, ordered $\frac{1}{4}$

gr. morphia sulph., repeat every forty-five minutes three times. Went to sleep at 10 P. M., slept twelve hours, awoke all right. Recovery as in the others.

This is the only case in which I have had any occasion to hesitate to push the use of chloral to the desired effect.

CASE VI.—Mr. W——, gardener. Called in the morning, 6 o'clock found him in full delirium tremens, had had an epileptic fit the day before, very severe. Gave 30 grains chloral, repeated in fifteen minutes 30 grains; went to sleep, and slept four hours, awoke rational; at 5 P. M. had another fit, in which he died. This is the only instance in which a fatal result has been associated with the use of chloral. "Post hoc" but not "ergo propter hoc." This case did not occur in the Home, but out of the city.

CASE VII.—Mr. ———, age fifty. Badly beaten five days before coming to the Home, had had fits, raised blood, very feeble, pulse 40, feeble; at 5 P. M. he had bromide and pill; 5.30 beef tea; 6.30, 40 grains chloral; 6.50, 40 grains, pulse 65. Went to sleep at 7.30 P. M., slept till 3 A. M., awoke one hour, still delirious, gave 40 grains, slept till 8 o'clock A. M., awoke all right. Number grains given, 120.

The records of all the other cases are simply the giving of 30 grains of chloral, and repeating in fifteen minutes for three times. When 120 grains have been given ease and quiet resulted. Recovery has been in almost all cases immediate after sleep.

STATE (OR PUBLIC) INEBRIATE ASYLUMS: THEIR SUPERIORITY OVER SMALLER (OR PRIVATE) INSTITUTIONS.

BY D. G. DODGE, M.D., SUPERINTENDENT OF NEW YORK STATE INEBRIATE ASYLUM, AT BINGHAMPTON, N. Y.

The time has now arrived when the public has a general knowledge of what is purposed by the establishment and conduct of inebriate asylums. The character of such institutions is now

understood and appreciated. They have gone through the experimental period, and have established themselves upon a sound basis of success. Their entire practicability, as well as genuine philanthropy, is now almost universally acknowledged; and with the admission of their utility and necessity the public is now ready for another and most important question in connection with these institutions, to wit: What kind of inebriate asylums will best effect the purpose for which such establishments are intended?

Of these institutions there can be but two classes: public asylums, founded and conducted by states or corporations, and smaller establishments, carried on by individuals or private associations. Of course, it is conceded that all establishments, public and private, of this character are beneficial in their purpose, and are generally successful in their management—with one object, each, of either class, should accomplish the same result—but the question to be considered is, Which of these two classes is advisable in point of practicability, and especially in respect of economy.

In answer to this question, or, at least, to prepare the way for a more extended discussion, I venture to offer the following suggestions, showing the superiority of public inebriate asylums over smaller and private institutions devoted to the same objects.

The first, and so far as the actual management of such institutions is concerned, the most important question to be considered, is economy, and the comparative expense of carrying on large and small establishments of this character. This is a most important consideration, especially where the institution must, wholly or partly, be supported by the public. In claiming the superiority, in an economic view, of large establishments, I present the suggestive illustration of all our large charitable institutions in the State; or what would be more obvious and better understood by the reading public, the familiar illustration of hotel-keeping. It is evident that a large hotel which will accommodate twice, or three times, or five times the number of guests in a small one, by no means de-

mands twice, or three times, or five times the expense in carrying on, even in the matter of supplies.

The main discrepancy is in the single item of rent, and a State or Public Inebriate Asylum pays no rent whatever, unless there is a mortgage on the property, and interest on that mortgage, or interest on the actual investment in real estate is estimated as the yearly rent. Otherwise, the comparison is still more favorable to the public asylum. It is obvious, for instance, that a multiplication of patients does not compel a proportionate multiplication of attendants, nor a proportionate increase of lights, fuel, and other expenses, which would be the same, or nearly the same, for fifty persons as for one hundred and fifty.

As a case in point: Suppose, in the New York State Inebriate Asylum, the number of patients, say eighty, were doubled, there would be no increase in the duties of the medical superintendent, or of any officer of the institution that would require any additional assistance; the number of servants need not be doubled, nor would the cost of light and fuel be doubled. The only item which, at first sight, would seem to require doubling, would be that of food. But here it would be found that there could be greater economy in the purchase and preparation of food. One hundred and fifty patients would not compel twice the cost of supplies for seventy-five patients. It would not require twice the actual amount of supplies, and the larger purchases necessary would carry the reduction in price which wholesale buying always brings. As for fuel, to roast five pounds of beef you must have a fire, and the same fire would roast fifty pounds. If the one hundred and fifty patients were divided into groups of twenty-five each, in different places, the cost of food and cooking would be far greater than for the same number together in one establishment. The saving in the expense for help would be in the same ratio.

It is apparent that in the smaller family or group system, where each establishment must supply its own attendance, light, food, and fuel, the expenses of any one of them must be more than double those of any two, and far more than quadruple

those of any four such families consolidated into a single one under one general management and economy. Expenses of every kind, in proportion to the number of persons, would be materially lessened, and waste especially would be much diminished.

I present this consideration of economy first in importance, because, to the public at large, it must be and can be demonstrated that these institutions, when once successfully established, can be made, by proper management, almost if not entirely self-sustaining. The only limit to such self-support is the commendable liberality of the State or of individuals in providing for indigent patients who may be desirous of availing themselves of the advantages of such asylums, or in taking care of persons who may be committed. In any case, however, it is the judicious, economic management of a public establishment that first commends its practicability and necessity to those who conceive that they are somehow directly or indirectly charged with, or taxed for its support—as in the case with state institutions generally. The next and not less important point to be presented in considering the superiority of large inebriate asylums over smaller ones, is their advantages as means of cure and reformation.

With regard to the reformatory, which is the curative, effect of the two classes of establishments, I am of the opinion that the system pursued at the New York State Inebriate Asylum, under competent administration, is calculated to result in what is purposed. Careful personal observation has shown me that the influence of the whole mass of patients upon each individual is a most salutary reformatory agent. Indeed, nothing can supply its place, and it is impossible to secure the same favorable results with a limited number of patients. Experience convinces me that this peculiar influence, especially upon patients who particularly need such influence, is worth quite as much as the example or admonition of the officers in charge. The general sentiment of the patients when rightly directed will always be in favor of the institution and its objects, and will morally and effectually overbear and nullify the feeble

opposition of the few who are disposed to rebel against wise regulations, and who are reckless or indifferent in respect of their own reformation. The experience and testimony of officers and patients alike will confirm this statement. The proper public sentiment in any community is powerful for good, and the larger the community the greater the influence upon individuals. And this is a powerful argument in favor of large public inebriate asylums; because, indisputably, the influence of one hundred well-disposed patients upon fifty patients of a different class would be greater than the influence in a smaller family of twenty upon ten. In a small group whatever influence is exercised is almost wholly personal, and is quite as likely to be bad as good. In a collective body in a reformatory institution, especially where the means of reformation must necessarily be mainly by the volition of the persons themselves there is sure to be a very considerable majority on the side of right, and this majority will mould the sentiment of the mass.

This is not mere theory. In my own experience, with more than eighty patients under my charge at once, I know that the large majority are men who earnestly desire a cure and reformation, and who not only do all in their power to secure it for themselves, but they lend powerful assistance, almost insensibly and by example mainly, in restraining, if not reforming, the small class of committed or involuntary patients who might be disposed to exercise an unfavorable influence at least, upon one another—while there must, of necessity, be a class of committed patients, and another class of those who are patients only by the persuasion of anxious relatives or friends.

It is fortunate that the majority of inmates are voluntary patients, who work with the officers for themselves and for their own restoration, and who largely assist, morally at least, in the management of the indifferent, reckless, or refractory with whom they are daily brought in contact. To this assistance is largely due the fact I have learned from my own experience, that apart from economic considerations, it is much easier to manage seventy or eighty patients than it is to take care of

forty or fifty. And this leads me to the consideration of the question of the classification of patients.

Apart from the immensely favorable influence of the majority upon the minority, I can conceive of no classification of patients in an inebriate asylum which would not be attended with disastrous results. If patients are classed according to character, culture, pecuniary means, or social standing, those who are ranked or who think they are ranked in inferior groups will naturally be wounded. A sensitive man needs sometimes only to be restless to very soon become thoroughly reckless. It is apparent, too, that by classification, the same standard would prevail in each separate class. If improvement was anywhere manifest it would be where it was least needed. The bad grouped by themselves, would accept their isolation, and their common influence, each upon the other, would be hardening; on the other hand, in the better class, unavoidably an aristocracy in the little community would be fostered, to the inevitable destruction of all discipline, and with the worst results to all reformatory measures.

Those who have undertaken the reformatory care of inebriates know how extremely sensitive the majority of them are. Not unfrequently unfavorable or reproving letters from relatives and friends will overthrow a power of good resolutions, or induce a fit of despondency, from which there is but one step to desperation; while anything that would seem to be a slight or an insult in the institution, would be equally detrimental, if not disastrous to the patient. I can conceive of nothing that would more deliberately insult a large body of patients, than the suggested classification.

The first step essential to the reformation of any and every patient, is the revival of that self-respect which will compel him to consider his reformation not only desirable, but imperative. To effect this, the patients, of whatever numbers, should feel that they are on the same footing and subject to the same treatment. The most intimate association should be encouraged, and naturally will be where all, or nearly all, are earnestly engaged in the same honest purpose. But so long as

human nature remains unchanged, the division of patients into two general classes is unavoidable. These are those who voluntarily submit themselves to such rules and regulations, as are imperative to the successful management of the institution, and those who persistently evade or neglect the same. Naturally and properly, to the first class will be conceded favors and privileges, from which the second class will rightly be debarred. This sort of classification is indispensable; any other classification is impolitic, if not impossible.

It is greatly in favor of large public asylums, that these are able to provide good libraries, well-supplied reading rooms, healthful amusements, and other means which do so much to relieve the almost inevitable monotony of residence in such establishments. A chaplain, a commodious chapel, and a good choir are essential adjuncts. In the New York State Inebriate Asylum, there is an admirable amateur theatre and a flourishing literary club. These things, which large institutions alone can sustain, are strong inducements to patients—first to come, and next to prolong their residence till their cure or reformation are substantially secured. The larger the number of patients, the greater the inducement to new comers, who thus feel far less their temporary isolation from home and friends, and who are certain of finding among so many, congenial associates for themselves. One great advantage possessed by state institutions, is that they have more power to restrain patients than belongs to a private asylum; and discipline can be better administered among the many than where the number is small. The trustees of a state institution are appointed by law, and the rules they prescribe have the endorsement of an act of the legislature. Thus, the asylum at Binghamton is protected by a special enactment, forbidding the sale of liquor and opium to its inmates, and visiting a heavy penalty on those who disobey. The rules governing the inmates are drawn up by a committee on discipline, who have received their appointments as trustees from the governor of the state, and the patients cannot reasonably ask or expect from the superintendent, any special and personal exceptions in their favor. Again, the superintendent

who has charge of eighty or more patients, finds it a much easier matter to carry out his disciplinary acts, than if only some twenty were under his care. The expulsion of half a dozen refractory patients makes but a small diminution in the establishment; whereas it would seriously reduce the income of a private asylum. Indeed, a rigid observance of rules is absolutely necessary where a large number of persons are concerned, and in this necessity the entreaties of parents and friends, personal interests, and all pecuniary considerations must yield to the good of the whole. And this must always be a strong argument, with those who have found the influences of home and family absolutely useless against the thirst for drink, in favor of a large public institution, as contrasted with the private and group system.

This view of the subject leads me to touch briefly and delicately upon the fact that state institutions, because of their freedom from private or personal speculation, are calculated to be conducted with an impartiality which is barely possible in the case of private asylums. Where the state pays the salaries of employees, and the profits of the institution are applied to the beautifying of grounds, the increase of libraries, and means of instruction and amusement, the erection of new buildings and other similar purposes, there need be no favoritism shown to patients, and no distinction made between rich and poor. Punishment is administered, and privileges are awarded without reference to the circumstances or standing of the patient, or the probable length of his stay under certain contingencies. It is not assumed that partial favors must necessarily be shown in a private institution. But it is contended that all temptation to favoritism is taken away in an asylum which opens its doors widely to the public, and acknowledges no law of control except the will of the state.

A more important point than those I have last mentioned, is the fact that the presence of a large number of patients permits their classification, in accordance with their regard for the rules of discipline, and their general deportment and evident intentions. It must be apparent that this is the only classifi-

cation that can be made in a reformatory institution, and that it is a division which ought to be made in all cases. Those who are really desirous of reform should be separated, so far as is possible, from the recently admitted, the reckless and the bad. Promotion should be made from the latter class as rapidly as the process of reformation will allow. An incentive to reform is thus placed before the patient as soon as he puts himself under the discipline of the asylum. At every step an appeal is made to the better part of his nature, and his self-respect and ambition are enlisted in his own behalf. If upon trial he makes a failure he is placed back at or near the starting point, and promotion is again set before him as the duty of his daily labors. At every step good influences surround him. He sees many men of high culture and intelligence, engaged in the same good work and subject to the same rule. This is one of his greatest encouragements. It would be taken away or largely diminished, if the number of his companions was comparatively small.

Now it must be remembered, that the great object of all institutions for the cure and reformation of inebriates, is the return of the patient to his family and friends in a sound condition of body and mind, with the complete restoration of his will-power. If the system of classification as here suggested be carried out, and the space of six months at least be generally allowed, this work can be accomplished successfully in the large majority of cases. The patient will enter an institution with the understanding that he is to be placed among those who are suspected of a continual desire to drink, and will be watched and guarded accordingly. This process will occupy some weeks (in my opinion about eight weeks), and when he has been well-tested, he may be placed among those whose liberties have been enlarged. As his stay continues and the desire to drink decreases, his privileges may be extended yet further. After a while they will exist but in name. At the end of his six months the patient will return to his home, not like a school-boy on a holiday, but simply as a gentleman who changes his residence from one city to another.

Such a process, with such results, the trustees of the New York State Inebriate Asylum anticipate on the completion of their building. It would be impossible in a private institution, where personal influences must have much to do with discipline. Yet no thoughtful man will deny its necessity and advantages.

In the long run, and at no distant day, state inebriate asylums must necessarily (as it occurs to me) swallow up private institutions, as it has been found that the state lunatic asylums were better adapted to their work, than the private and small establishments of that character. There was an old prejudice against state lunatic asylums, arising from the notion, that where many patients were gathered together, some patients would suffer from neglect. But it has been found that the state asylums do their work thoroughly, while they are free from the suspicions that naturally and of necessity accompany private enterprise in that direction. The same result will probably occur in the matter of asylums for the cure of inebriates. It will be found that the state institutions grow to have more weight and character with the people, than those that depend upon voluntary enterprise or speculation. The state stands guardian over the unfortunate man committed to its care, and his friends will feel their confidence in his cure increased by the guardianship of a great commonwealth.

With these general views as to the superiority of large public inebriate asylums, the only question remaining is, as to the precise number of patients who might safely be committed to the care of a single superintendent, with competent assistants. With my present experience, I am of the opinion the New York State Inebriate Asylum when completed, will accommodate from one hundred and fifty to two hundred patients, who can be not only properly managed and successfully treated under one competent head, but conducted with economy and profit to the state.

BRIEF HISTORICAL SKETCH OF THE "CHICAGO WASHINGTONIAN HOME;" WITH SOME GENERAL REMARKS.

BY THOMAS M. VANGOURT, SUPERINTENDENT.

In the year 1863, the question of organizing a "home" in Chicago for such inebriates as wished to reform, began to be agitated. It was thought that if an asylum could be established where they could be received and treated with kindness and brotherhood and their physical wants provided for at the same time, many might be recovered. Encouraged by the results of the Washingtonian Home in Boston, a few philanthropic men instituted an active movement in October of the year above named, and at a public meeting held on the 19th of January succeeding, the Washingtonian Home Association was organized and a constitution adopted. At a meeting one week subsequently, a full board of officers was elected. At first the promoters of the enterprise were principally delegates from the lodges of Good Templars, located in Cook County.

The board of directors caused articles of incorporation to be filed in the recorder's office, confirmed the appointment of Mr. Tower as superintendent, and appointed a finance committee to report some plan for procuring the pecuniary aid necessary to sustain the enterprise and place the institution on a permanent basis. In organizing the association and sustaining the home during the past year, the pecuniary resources have been wholly temporary, consisting of an appropriation by the Grand Lodge of Good Templars of the State of Illinois, and such contributions as could be obtained from friends, chiefly through the action of a committee of ladies. The finance committee, in their report, urged strongly the necessity of a permanent endowment, the income from which should be sufficient to place some of the more important items of annual expenditure beyond the contingencies of mere voluntary contributions. For this purpose, the committee recommended the retention and investment of all sums of \$100 and over, received by dona-

tion, subscription or legacy, until a permanent endowment of at least \$30,000 had been obtained. It was also recommended that a donation or legacy of \$500 should constitute the donor an honorary life member; and a donation of \$1000 should constitute the donor an honorary life director.

Like many other organizations which have achieved large results, the home had a humble beginning; but has gradually worked its way into popular favor by the good which it has accomplished. Hon. Charles J. Hull was elected the first president, which office he filled up to January, 1871, when he declined, on account of private business, which called him a large portion of the time away from the city. That he filled the position with ability and efficiency is the united testimony of all his co-workers. Dr. N. S. Davis succeeded Mr. Hull, and is the present executive officer of the home. Henry C. Morey, Esq., was chosen the first secretary, and so satisfactory has been his discharge of the laborious and responsible duties of the office that he still presides at the desk.

The general management of the home, is through a board of directors consisting of thirty members, whose active duties have been delegated to an executive committee of five, who have the appointment of a superintendent and others concerned in the internal affairs of the institution. There is also a ladies' committee of fifteen, whose business is mainly to see to the furnishing of the home.

In one of the first circulars sent out by the board, the underlying principle of their operations was thus stated:

"The means of reformation chiefly relied on is the *law of kindness*. The inebriate is regarded as a *man*, though all the better instincts of his nature have been perverted, sympathy is extended to him, hope and confidence are excited, self-respect is aroused, self-control is established, and he gradually learns to stand alone. The fact, too, that his effort to reform is a voluntary one, adds much to his confidence and increases his desire to restrain his appetite. The example of others, who like himself, are striving to regain their former standing, has also a salutary and cheering influence on his mind."

In the first report of the superintendent, it was said:

"From the personal history of many who have fallen through strong drink, I am satisfied that to three causes may be ascribed most of the drunkenness which we seek to cure. Until public opinion shall change upon these points, the public sentiment be enlightened, and the Christian conscience awakened, drunkards will be made out of the best and noblest of the young men of the land, and those who have been partially reclaimed will be liable to fall at every hour of their lives.

"I refer to the use of stimulants in infancy, and early childhood; the use of domestic wines, and other so called weaker and harmless beverages; and the use of alcoholic medicines. There is no safety for old or young, except in *total abstinence from all that can intoxicate*. More than one inmate of the home, has in his lifetime been dragged down by medicines, of which alcohol formed a part; or, by partaking of cider, beer, or wine, supposing them to be harmless. In either case, the alcoholic element, however disguised or small in quantity, acts like a spark of fire in a magazine of powder, arousing beyond mortal control the dormant appetite of its unfortunate victim. A reform in the social habits of the day, and in the course of physicians in prescribing alcohol, would save the world from a large share of this moral, physical and social curse, to save a few of the victims of which this, and other similar homes have been established."

The same influences are still at work, and there will continue to be room for Washingtonian Homes and Inebriate Asylums, until the reform in the manners and customs of society referred to, become an established fact.

The second annual report, records the purchase of the property known as the Union Park Hotel, for the use of the home, to which it removed in March, 1865, where it still remains. The receipts during the year covered by the report were \$6908, and the expenditures \$6369. From the superintendent's report we learn that on the 16th of February, 1865, there were but five inmates in the home. During the year, forty-five were received, thirty-five of whom were regarded as confirmed in-

briates, and ten periodical drinkers. The superintendent in his report says:

"The success which has thus far attended our efforts to reform the inebriate, and restore him to sobriety, usefulness, and honor, has been extremely gratifying, and should call to the support of this institution the active sympathy and substantial aid of every friend of humanity in the north-west."

"Meetings for prayer and conference are held in the chapel of the home every Sunday evening. At first these meetings were but thinly attended, and the inmates were with difficulty induced to participate in them. Now, the chapel is well filled with an earnest and attentive congregation, and the inmates esteem it a special privilege to be present, and eagerly look forward to the Sunday evening meetings, as seasons of rare enjoyment, and mutual edification and encouragement. The inmates, and all others who choose to attend, have also been favored with a series of highly instructive lectures, by Dr. N. S. Davis, on the effects of Alcoholic Drinks upon various structures and functions of the Human System."

The buildings secured for the use of the home, contained one hundred and four rooms, eighty of which remained unfurnished at the date of the report.

The third report of the executive committee touches upon a question which has been a source of much discussion and perplexity during the whole existence of the home. That of providing some suitable occupation for the inmates. It was also strongly urged upon the attention of the board by the attending physician, but remains undecided to this day. An effort, which proved of little practical utility, was also made to provide for the current expenses of the home, and to secure a permanent source of revenue. The only plan which was subsequently carried into execution, was the securing of the passage of a law by the Legislature of the State, appropriating ten per cent. of the moneys derived from the licensing of the sale of intoxicating drinks in Chicago and Cook County. This law went into operation the succeeding year, and produced a revenue to the home of \$9579 the first year, which has con-

tinued to realize about the same amount ever since from that source, thus making the traffic bear a small portion of the burdens and expenses which it inflicts upon the community. The entire receipts this year realized \$12,101, and expenditures \$10,937. During this year the number of inmates received was largely increased, reaching one hundred and fifty-five; of these twenty-seven are classed as constant drinkers, and the remainder as periodical. The charter under which the home was now working as an incorporated institution authorized the home, to receive for treatment men arrested by the police while in a state of intoxication. Thirty-six of this class were inmates of the home during the year.

The scientific lectures of Dr. N. S. Davis, upon the "Physical Effects of Alcohol," and cognate subjects are frequently referred to in the reports as being of the highest value. The subject of providing employment for the inmates is again referred to in the report of the superintendent for this year (1867), as one of much importance, as an aid in the reformatory work of the home. He also refers to the question of a home for female inebriates, as follows:

"A department and separate building is required for the care and cure of female inebriates, a class, it is feared, already numerous, and rapidly increasing, but for the reformation of which no effort is made. Family pride; regard for loved ones; the native delicacy of woman, and other causes, may have kept from the public the facts; but it is nevertheless true, that the inroads of intemperance are not confined to the male sex. As experience has proved that but few have the tact, patience, hopefulness, and charity requisite, to properly treat these cases, and perhaps none could successfully do so, amid the constant intrusions and interruptions of private homes and public neighborhoods, could not apartments be secured, and well qualified Christian women of experience be engaged to devote their souls to this work of reforming their unfortunate sisters? There are those who from this source have suffered directly or indirectly as wives and mothers, who are every way adapted, with the aid of the executive committee, to do this work. Numerous appli-

cations from first families, so-called, would at once be made, could such a department be established. That such is greatly needed, no one will deny."

I may as well say here that the experiment was subsequently tried. A large and commodious building was secured, a matron appointed, and other necessary arrangements made. But the enterprise proved a failure, and after a year or two was abandoned, not because there were no subjects, for female inebriation is fearfully prevalent among us.

The reports for 1868 are somewhat imperfect, on account of changes in the superintendency, and other causes. The admissions were one hundred and twenty-seven, besides quite a number temporarily cared for. Forty-five are classed as moderate constant drinkers, and the remainder as periodical. Twenty-five who had been arrested for drunkenness were among the admissions this year. Five of the former graduates of the home died during the period covered by the report, and it is recorded that many are successfully and pleasantly located in our city and are doing a prosperous business; and, says the report: "In view of the incalculable amount of good accomplished, we should return to our Heavenly Father our heartfelt thanks."

The receipts of the year were \$16,925, of which \$10,969 were from the ten per cent. of the license money. The expenditures were \$15,936, \$6420 being the balance due on the property of the home, now wholly paid for.

The sixth annual report for 1869, mentions that quite large and important additions have been made to the library. Also that more than one-third of the whole number admitted to the male department, have been wholly destitute of money, and have been treated gratuitously, and it is announced as the permanent policy of the managers of the home, to extend its aid to as many of this class as possible. The permanent funds of the home were increased this year by a liberal legacy, from the late Jonathan Burr of Chicago. We have also the first report of the superintendent of the female department, before referred to, which was organized during the year. There were fifty

regular admissions and ten re-admissions. Of the forty-eight discharged, twenty-three are reported as doing well, eight not heard from, and seventeen "in the old track," doing no better than before.

The superintendent says: "Thirty-six of the number admitted to the home during the year, have had 'delirium tremens.' Only twelve of the number suffered from the disease after reaching the home; many others came suffering much, and with strong symptoms of this disease. A number had quite severe attacks of "*gastritis*," but with proper medical treatment and good nursing they soon regained their health. I am happy to state, that of the large number admitted who have thus suffered, only one case has resulted fatally. This case was a man forty-five years of age, who was in a feeble state when admitted, and who suffered from a severe attack of *delirium tremens*, which was the cause of his decease."

During the year ending January 9th, 1871, a larger number of persons addicted to the use of ardent spirits were received into the home, than for several years previous, and "the success in effecting reforms," says the report of the executive committee, "has been sufficient to afford a fair degree of encouragement to all who are interested in this work. The home in this city, in the number of its inmates, the success of its reformatory work, and the value of its property, is scarcely inferior to the State Inebriate Asylum at Binghamton, New York." The necessity of better buildings and more complete accommodations is urged, and \$3800, was set apart as a fund to secure this object. The number of admissions was two hundred and six. Only one or two applications were received for admission to the female department. It was recommended that the executive committee select and introduce into the home such manual labor as in their judgment is best adapted to be made useful to the inmates and profitable to the home, and \$500 was placed at the disposal of the committee for this purpose.

So far in the current year the admissions have been one hundred and forty-two. The reformatory work has been such as to afford continued encouragement to all interested in the

success of our efforts. We have obtained through the skill of our attending physician, Dr. T. D. Fitch, almost entire control of that terrible disease, *delirium tremens*, with which so many of the inebriates are afflicted.

This sketch having been written amid the turmoil and excitement incident to our great fire, is necessarily imperfect and discursive. The fire also, in its prospective diminution of our resources, has imposed on us the labor of a partial re-organization so as to keep the Home from financial embarrassment.

STATISTICAL.

In order to show in a small compass the working of the Home during the seven and three-quarters years of its existence, I present the following statistics, compiled from the Annual Reports:—

Year.	No. Admitted.	Married.	Single.	Constant Drinkers.	Periodical Drinkers.	Agea.	Natives of U. S.	Other Countries.	Unknown.	
1864	23	15	8	2	21	27 to 63	18	4	1	
1865	45	21	24	10	35	21 to 57	33	11	1	
1866	46	22	24	5	41	23 to 64	31	15		
1867	155	68	87	27	128	19 to 61	91	51	13	
1868	127	48	79	45	82	17 to 71	76	46	5	
1869	128	42	86	48	80	22 to 60	77	51		
1870	206	77	129	70	136	18 to 65	113	86	7	
1871	142	69	73	68	74	21 to 60	89	49	4	To Oct. 1st.
Total.	872									

OCCUPATIONS.

The occupations of the inmates embrace nearly every one carried on in our community; those of bookkeepers and clerks, however, largely predominate over the others. The largest number of occupations recorded in any single year is sixty. We give some of the most prominent ones: actors, 7; bookkeepers, 77; clergymen, 11; clerks, 131; druggists, 4; edi-

tors, 8; lawyers, 20; merchants, 52; physicians, 8; printers, 40; reporters, 2; salesmen, 23; travelling agents, 24; other occupations, 465; total, 872. The trades and other occupations are represented by about equal numbers.

RESULTS.

Regular admissions on papers furnished by Committee,	880
By Superintendent temporarily (about)	220
Total,	1100

Number of individuals admitted,	684
Number of re-admissions,	416
Total,	1108

Number of individuals admitted,	684
Positively or probably permanently benefited and reformed,	165
Hopeful of permanent good results and temporarily benefited,	176
Utterly hopeless or very doubtful,	343
Total,	684

Average of permanent reforms to individuals as 1 to 19.

Average positively benefited to individuals as 1 to 4 $\frac{1}{4}$ nearly.

Average temporarily benefited to individuals as 1 to 4 nearly.

Average doubtful or hopeless to individuals as 1 to 2 nearly.

From my own observation, combined with that of others who have enjoyed great facilities for arriving at correct conclusions, I have no hesitation in expressing it as my belief, that in the above statistical tables those marked with "good results" may be considered as reformed, so far as reformation can be shown by a temperate life. Judging them by their works and their deportment, I reiterate the opinion that their apprenticeship in temperance has been faithfully served, and that they may be considered as masters in the great work of reformation.

These remarks will apply equally well to many of those marked "hopeful." It therefore may be fairly stated that one-fourth ($\frac{1}{4}$) of those unfortunate enough to need the assist-

ance rendered by the Home, are entitled to be considered as reformed, giving an aggregate of one hundred and seventy-one (171) rescued from the vice of drunkenness, saved to society, and ranged as working and effective advocates of the cause of temperance, as the direct results of our work. The indirect and incidental to the many holding social and domestic relations may not be estimated. It is above all price, and legitimately belongs to the blessed influences exerted by this institution.

Five-ninths ($\frac{5}{9}$) of those reputed "reformed" in these statistics, covering a period of ninety-four (94) months, have endured the mental agony and physical anguish incident to that most horrible of all diseases, "delirium tremens," another evidence of the desolating nature of intemperance, and another warning to those entering upon its paths, that "at length it biteth like a serpent, and stingeth like an adder."

It may perhaps be proper to state that in consequence of the great fire which has desolated our city and crippled its business and resources, the executive committee has changed somewhat our plan of operations. In order to prevent a financial crisis, and to continue the Home on a paying basis, the Committee has voted to open our building to those rendered homeless and destitute by the recent conflagration, receiving enough to cover current expenses from the General Committee of Relief. The ten per cent. upon licenses has also been relinquished to the city during the existing strait and financial difficulties.

GENERAL REMARKS.

The problem in regard to the treatment of the inebriate is a difficult one to solve. There are so many intricate considerations involved in it, that it requires great wisdom, and an insight into the human character and the springs of human action, which are given to but few. Man is so much swayed by appetite and passion, when those which are evil get possession of his physical, intellectual and moral attributes, that it is hard to reclaim him from the ways into which he has fallen. A long course of inebriation lessens the force of the will, en-

feebles the intellect and obscures the moral perceptions to such a degree, that reformation is made difficult and often impossible.

The theory that inebriation is a disease, and ought to be treated as such, medically and judicially, undoubtedly has much of truth in it.

Kleptomania is a mental and moral disease, and I have no doubt but what the same is the case with some other crimes. There is in all probability many times a something in the constitution which irresistibly impels a man to the commission of crime. But inebriation is not only a mental and moral disease, but a physical disease as well, and always, except where there is implanted the hereditary predisposition, it is self inflicted, and therefore, in its incipency, at least, criminal. It is true it reaches such a point of control over the will that the inebriate becomes an irresponsible being, were it not for his own agency, in bringing this condition upon himself. But still he is an object of pity, of sympathy, and, so far as the safety of society will permit, should be the object of judicial mercy.

The laws of Illinois recognize inebriation as a species of insanity, and provide for the appointment of a conservator to take charge of the drunkard's property, as in the case of a lunatic. But as it is a voluntary, self-imposed insanity, the regulation does not go so far as to protect the subject of it in crime, or wrong doing, but is rather punitive in its nature, imposing disabilities.

There is a question of far greater importance, than how shall we treat the inebriate? It is, how shall we prevent men from becoming drunkards? This lies back of the other, and ought to receive much more consideration than it has done, either at the hands of this association, or the public at large. At the best, with all our efforts, with all our expenditure of labor and money, but comparatively few of the victims of the liquor traffic can be made whole again. So long as society licenses and permits the existence of the liquor traffic, it is morally bound to provide for its results, by establishing inebriate asylums, for those who are ruined under the sanction of its laws.

The inebriate once in the asylum, how shall he be treated?

is a question of paramount importance, upon the proper solution of which depends our success. As men are not all *morally, mentally or physically* constituted alike, it is evident that it requires a varied treatment to make the management of an asylum produce the desired results. We cannot set up a Procrustean bed, and shorten or stretch every man so he shall fit it. That is, we cannot have iron rules, nor a stereotyped practice for every one alike, which shall be as unalterable as the laws of the Medes and Persians. But rather while working upon a general and uniform plan, we must make allowance for a diversity in the character and dispositions of the subjects upon which we operate. There is one thing that will reach every human heart and exert an influence, more or less, that is kindness. Sympathy expressed in word and deed will not return to us empty, even though it be bestowed upon the most degraded. There is something in the human soul that responds to love and kindness. A glimmer it may be at first, but there is a spark beneath which cannot be wholly extinguished. Therefore the law of kindness should be supreme in the government of inebriate asylums. If this fail, nothing else will succeed. He who will not be saved by it, is lost. There should be a proper discipline to meet exigencies and to keep down the uprisings of unsatisfied nature.

The social element is one of great power in our work. The inebriate loses his manhood, his self-respect; he cherishes the idea that he is despised, looked upon as a degraded being, whom all avoid, and with whom none like to associate. But let him be made to feel that he is indeed regarded as a "man and a brother," and it infuses new life into him, new hopes and aspirations. We have endeavored to bring this element to bear as far as possible in the Washingtonian Home of Chicago. As agencies in this department of our work, we have a Lodge of Good Templars, and a Division of Sons of Temperance, which hold weekly meetings in our hall, and meetings for discussion, conversation and social intercourse on Friday evenings, and on Sunday evenings, meetings of a more religious character. These meetings are made interesting and attractive as far as

possible, and I regard them as most important and useful helps to those who are striving to free themselves from the chains of their bondage.

In extreme cases where delirium tremens, or other serious disorders supervene, we of course resort to medical treatment, as we would in any other class of disease. The physician of the Home, Dr. T. D. Fitch, has been very successful, and has obtained control of delirium, and we have very few protracted cases. Medication is also frequently resorted to with the best results in ordinary cases of alcoholism.

We supplement our physical treatment with appliances to restore the mental powers to their normal condition, and employ moral and religious means to strengthen the purposes and resolutions of reformation.

ANNOUNCEMENTS.

NEW YORK STATE INEBRIATE ASYLUM.

The following announcement is respectfully submitted to the consideration of the medical profession, and to the public in general:

It is believed that the experience of the past five years has demonstrated not only the utility, but the necessity of the institution known as the **NEW YORK STATE INEBRIATE ASYLUM**. We speak advisedly when we affirm that at no time has its prospect for usefulness been more promising, or has it been in so good a condition, so far as the treatment of patients is concerned, as it is now. We have sought to make it what it was originally intended to be, an asylum for the treatment of inebriety, and a reformatory Christian home.

There are very many persons in our State, and throughout the country, the victims of a terrible mania for drink, who need the salutary treatment which this Institution affords, and who, without such aid must in all human probability perish. We therefore, disclaiming every object except an earnest desire to aid in restoring to their friends and to society, a class of men fallen indeed, but not beyond recovery would earnestly commend this Institution as an efficient means for securing an end so important and inestimable.

We deem it proper to state, that ample means are provided to meet the physical, intellectual and religious wants of the patients. The Asylum occupies a remarkably healthful and beautiful site. It is furnished with baths, and a great variety of amusements; with a good library and reading room, which is supplied with the leading daily newspapers and the American and British magazines.

The rules of the Institution require *regularity* in regard to meals—the hours of retiring and rising—and the attendance on the religious exercises of the establishment.

The Asylum has been placed under the charge of Dr. DANIEL G. DODGE, a man of superior administrative qualifications and towards whom there is but one sentiment prevailing with the officers of the Institution and among the patients, that of profound respect for him as a gentleman, and confidence in him as a skillful physician.

By order of the Trustees,
REV. SAMUEL W. BUSH, Register.
BINGHAMPTON, N. Y., Dec. 1870.

WILLARD PARKER, M.D.,
New York, N. Y.,
President Board of Trustees.

WASHINGTONIAN HOME, FOR THE CURE OF INEBRIATES.

ESTABLISHED 1857.

Applications for admission to be made to the Superintendent,

WM. C. LAWRENCE,
BOSTON, MASS.

INEBRIATE'S HOME FOR KINGS COUNTY,

Shore Road, near Fort Hamilton,

LONG ISLAND, NEW YORK.

This Institution originated in the desire of a few earnest men to ameliorate the condition of inebriates, and especially those who alternate between the tavern, the police station, and the prison. It is admitted by judges, criminal lawyers, and others, "that while it would be difficult to point out a single instance of reformation brought about by incarceration in a jail, there are at the same time presented to the public view, hundreds of proofs of the degrading and hardening process of prison association."

Deeply impressed with these convictions, an organization was formed and duly incorporated in the year 1866, for the purpose of establishing a Home for all classes of inebriates.

At the following session of the State Legislature, a grant was obtained for this purpose, and a large house and grounds were leased in Brooklyn, to carry out the object. The success of the experiment, during the first year, far exceeded the most sanguine expectations of the promoters of the institution. The house was crowded beyond measure, and large numbers were refused admission, for the want of the necessary accommodations.

Employment is found for every free patient. Mechanics, tailors, shoemakers, &c. work at their respective callings. There is also a small printing office, and the annual reports and other printed documents are worked off by compositors and pressmen, several of whom have from time to time sought a refuge in the Institution. The farm is under cultivation, and this department occupies most of the free labor of male patients, and supplies the Home with hay, corn, milk, and vegetables.

The mansion house, at present occupied for the Home, is beautifully situated on the banks of the Narrows, commanding a view of the highway of the ocean, the Upper and Lower Bays, Staten Island, and the distant shores of New Jersey.

The following is the list of officers for the present year:

HON. JAMES S. T. STANAHAN, *President*.
HON. JOHN DIKEMAN, *Vice-President*.
THOMAS E. BUCKLEY, *Treasurer*.
REV. JOHN WILLET, *Secretary and Superintendent*.
HON. S. D. MORRIS, *Counsel to the Corporation*.
LEWIS D. MASON, M.D., *Physician*.
THEODORE L. MASON, M.D., *Consulting Physician*.

WASHINGTONIAN HOME OF CHICAGO,

Located at 566, 568, 570 & 572 West Madison Street.

ESTABLISHED IN JANUARY, 1867.

N. S. DAVIS, M.D., *President*.
H. C. MOREY, *Secretary*.
T. DAVIS FITCH, M.D., *Consulting Physician*.
T. M. VANCOURT, *Superintendent*.

COMMITTEE ON ADMISSIONS.

DR. D. A. COLTON, DR. T. D. FITCH, J. L. DRAKE.

Persons living at a distance may be received on the order of the Committee of Admission.

Communications should be sent to T. M. VANCOURT, Superintendent.

PENNSYLVANIA SANITARIUM.

At Media, Pennsylvania, fourteen miles from Philadelphia, on the West Chester and Philadelphia Railroad.

This institution has been established for the treatment of intoxication from alcoholic liquors, opium, and other narcotics. The building is convenient; the rooms are airy, lighted with gas, and tastefully and liberally furnished.

A large parlour, billiard-room, library, and music, afford means for social intercourse and entertainment.

Patients are treated and trusted, with special reference to preserving their self-respect.

For gentlemen who desire to rid themselves of the habit of alcoholic or opium excess, the Sanitarium offers the comforts of a home, the healthful surroundings of a salubrious district of country, with such hygienic influences as may relieve the physical causes of intoxication, where they exist, and such moral support as may strengthen the will to avoid future indulgence.

Billiard room and table free.

Two daily mails and telegraphic communication with all parts of the country.

Payments quarterly in advance.

Terms vary with size and location of rooms.

Address,

JOSEPH PARRISH, M.D., *President*,
MEDIA, PA.

GREENWOOD INSTITUTE.

(Eight miles from Boston, on Boston and Maine Railroad.)

This Institution is established for the reception and treatment of patients suffering from disease, or derangement of the nervous system, caused by overtaxing the brain, by too sedentary habits, or the excessive or injudicious use of alcoholic or narcotic stimulants.

From fourteen years observation and experience, I am convinced that the diseased organism can be restored to health in a large proportion of cases and that inebriety is as amenable to proper treatment as other Psychological maladies.

Many hundreds of such patients have been reclaimed from an apparently hopeless condition to lives of respectability and usefulness, and restored to domestic love and happiness.

I am happy to be able to state to the friends of victims to the fearful disease of *Narcotism* (opium habit), that they need not despair of the full restoration of the unhappy slave to this terrible vice.

I purpose for the present, to receive patients of both sexes, being painfully aware, that, heretofore, women had no asylum where they could seek a cure from the above diseases.

The terms for board and treatment are from fifteen to thirty dollars a week, varying according to the accommodations required. In cases requiring extraordinary care and attention, there will be a proportionate extra charge.

All inquiries addressed to me at Greenwood, Mass., will be immediately answered.

Patients are expected to remain three months, unless I should think them fit to be discharged within that time.

Payment will be required in advance.

ALBERT DAY, M.D.,
Superintendent and Physician.

Boston Office, Room No. 11 Tremont Temple. Office Hours, 10 to 12 o'clock A.M.
GREENWOOD, Dec. 1, 1870.

HARLEM ASYLUM FOR INEBRIATES,

On Gilmor Street, near Franklin,

BALTIMORE, MD.

CARY B. GAMBLE, MEDICAL SUPERINTENDENT.

This Institution is now open for the reception and treatment of patients addicted to the excessive indulgence of opiates or alcohol.

The asylum is beautifully located in a large grove, containing some ten acres of ground.